N61165.AR.004007
CNC CHARLESTON
5090.3a

COMPLETION REPORT INTERIM MEASURE FOR SOLID WASTE MANAGEMENT UNIT 2 (SWMU 2) VOLUME 2 OF 3 CNC CHARLESTON SC

11/29/1999

SOUTH CAROLINA RESEARCH AUTHORITY

COMPLETION REPORT

INTERIM MEASURE FOR
SWMU 2
NAVAL BASE CHARLESTON
CHARLESTON, SC

Volume 2 of 3

Prepared for:

DEPARTMENT OF THE NAVY
SOUTHERN DIVISION
NAVAL FACILITIES ENGINEERING COMMAND
CHARLESTON SC

Contract Number: CHNPO9923

Prepared by:

SOUTH CAROLINA RESEARCH AUTHORITY
Environmental Enterprise Group
1899 North Hobson Avenue, Bldg. 30
North Charleston, SC 29405-2106

November 29, 1999

South Carolina Department of Health and Environmental Control

739 (6) 9202HH01

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 013370

2. Page 1 of 1

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

3. Generator's Name and Mailing Address ~~SOUTHERN FACILITIES~~ SOUTHERN NAVAL FACILITIES ENGINEERING COMMAND
CARETAKER SITE OFFICE
P.O. BOX 190010, N. CHARLESTON, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: WILLS TRUCKING, INC.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Route 1, Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ. HAZARDOUS WASTE SOLID, N.O.S., 9, N/A 3077, PG III (D008)	001	CM	16 30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. - - c. - -
b. - - d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information ERG # 171
MANIFEST INFO TO:
GARY CRAWFORD (843) 743-9985 x 32
RICK NIELSON (843) 743-9985 x 33

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD S NIELSON | Signature | Month Day Year: 07 21 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Meckelvaney | Signature | Month Day Year: 07 21 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space WO# 237003
J.a PW 01343-1102

a. 30280 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

7207HH01 84960

South Carolina Departm nt of Health and Environmental Control

9:03

9

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 3 7 1

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name Wills Trucking, Inc. D. H.

6. U.S. EPA ID Number 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y
b.				
c.				
d.				

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 331

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(~~803~~ 843) 743-9985 D. H.

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GENERATOR

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Printed/Typed Name RICHARD G. NIELSON — Signature [signature] — Month 0 7 Day 2 6 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name Don Houston — Signature Don Houston — Month 0 7 Day 2 6 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space 237289

a. 51540 lbs. c. ____ lbs.
b. ____ lbs. d. ____ lbs.

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

Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

9207HH07

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

9:01

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13372
2. Page 1 of 1

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

3. Generator's Name and Mailing Address: SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc., Rt 1 Box 255, Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	0008
b.					
c.					
d.					

GENERATOR

Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILOR # 310

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(~~803~~ 843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name	Signature	Month	Day	Year
RICHARD G. NIELSON	[signature]	07	26	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Stanley Garrain	Stanley Garrain	07	26	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

237258

a. 50300 lbs. c. _____ lbs.
b. _____ lbs. d. _____ lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
A. Anderson	Arvin Anderson	07	26	99

South Carolina Department of Health and Environmental Control

9:SC (12)

92074H030

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 Manifest Document No. 1 3 3 7 3

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 373

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(~~803~~ 843) 743-9985

Public reporting burden for this collection of information is estimated to average: 30 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name	Signature	Month	Day	Year
RICHARD G. NIELSON	[signature]	0 7	2 6	9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jerry Smith	[signature]	0 7	2 6	9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

Discrepancy Indication Space
23726

a. 39180 lbs. c. _____ lbs.
b. _____ lbs. d. _____ lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
D. Anderson	[signature]			

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13374

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

GENERATOR

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER # 460

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(~~803~~ 843) 743-9985

Public reporting burden for this collection of information is estimated to average [illegible] minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name	Signature	Month	Day	Year
RICHARD G. NIELSON	[signature]	07	26	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
John Eargle	[signature]	07	26	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

Discrepancy Indication Space

237260

a. 46860 lbs. c. _____ lbs.
b. _____ lbs. d. _____ lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]			

18840
10.34

South Carolina Department of Health and Environmental Control

15

9207HH95

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: S C 0 1 7 0 0 2 2 5 6 0
Manifest Document No.: 13375
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above — K. Handling Codes for Wastes Listed Above

a. P W - 0 1 B 4 B - 1 1 1 0 2
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER # 415

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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GENERATOR

Printed/Typed Name: RICHARD G. NIELSON
Signature: [signature]
Month Day Year: 07 26 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HAROLD JACKSON
Signature: [signature]
Month Day Year: 07 26 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237262

a. 43380 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible]
Signature: [signature]
Month Day Year

South Carolina Departm nt of Health and Environmental Control

9207HH06

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

79740 24

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 13376
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 D. H.

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-013A3-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 331

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
~~(803)~~ 843 743-9985 D. H.

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 07 Day 26 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DON HOUSTON — Signature: Don Houston — Month 07 Day 26 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
237263

a. 46100 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice — Signature: Jan Justice — Month 07 Day 26 Year 99

South Carolina Department of Health and Environmental Control

82522

25

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 3 7 7

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name:
8. U.S. EPA ID Number:

9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

GENERATOR

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 A 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above
ON-SITE WASTE FACILITY
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 310

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
~~(803)~~ 843 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 0 7 2 6 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 0 7 2 6 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

FACILITY

19. Discrepancy Indication Space
237264

a. 5 1 1 6 0 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Dan Justice — Signature: Dan Justice — Month Day Year: 0 7 2 6 9 9

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13378
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y
b.				
c.				
d.				

D 0 0 8

GENERATOR

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information TRAILER # 460

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(~~803~~ 843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 07 26 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle — Signature: [signature] — Month Day Year: 07 26 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
237265
a. 50000 lbs. c. _____ lbs.
b. _____ lbs. d. _____ lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] — Signature: [signature] — Month Day Year

9207HH09

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

74580 28

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: SC017002256 Manifest Document No.: 3379
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone: (~~803~~ 864) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name:
8. U.S. EPA ID Number:

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BA3-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information: TRAILER # 373

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(~~803~~ 864) 743-9985

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month 07 Day 26 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith | Signature: [signature] | Month 07 Day 26 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
a. 42960 lbs. c. lbs.
b. lbs. d. lbs.
237266

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

South Carolina Department of Health and Environmental Control

80180 29

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 3 8 0

2. Page 1 of 1

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3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 B 4 B - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

WASTE INSPECTOR DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 415

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(~~803~~ 843) 743-9985

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GENERATOR

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 0 7 Day 2 6 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: HAROLD JACKSON — Signature: [signature] — Month 0 7 Day 2 6 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space

237267

a. 44780 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: Tony Justice — Signature: [signature] — Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13381

2. Page 1 of 1

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3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BAB-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #401
WO# 2372168
24 hour emergency contact: Rick Nielson or Gary Crawford
~~(803)~~ 843 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators; 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month 07 Day 26 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Merkelvaney | Signature: Hubert Merkelvaney | Month 07 Day 26 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
a. 54820 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator, Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice | Signature: Jan Justice | Month 07 Day 26 Year 99

South Carolina Department of Health and Environmental Control

6.14 (18)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 3382
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name Wills Trucking, Inc. JE
6. U.S. EPA ID Number OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01B6B-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER #4100

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
JE 4C(843)(803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name GARY L CRAWFORD Signature [signature] Month 07 Day 26 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name John Eargle Signature [signature] Month 07 Day 26 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name Signature Month Day Year

FACILITY

Discrepancy Indication Space 237272

a. 41120 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name A Anderson Signature [signature] Month 07 Day 23 Year 99

9207HH13 8080

South Carolina Department of Health and Environmental Control

6.10 15

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 3338
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803 843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number 0H0068913409

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number SCD070375985

G. State Facility's ID

H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. PW-01843-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #310

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
843 (803) 743-9985

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 07 Day 26 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stanley Garvain | Signature: Stanley Garvain | Month 07 Day 26 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237273

a. 51340 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

South Carolina Departm nt of Health and Environm ntal Control

6-07 (14)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 3 8 4
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985 D. H.

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H 0 0 6 3 9 1 3 4 0 9
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C 0 0 7 0 3 7 5 9 8 5
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 A B - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

INSPECTOR

15. Special Handling Instructions and Additional Information
TRAILER #331
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) (803) 743-9985 D. H.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U S Environmental Protection Agency, 401 M St., S W Washington, D.C 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D C 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month Day Year: 07 26 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston — Signature: Don Houston — Month Day Year: 07 26 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
237269
a. 53880 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson — Signature: April Anderson — Month Day Year: 07 27 99

GENERATOR — TRANSPORTER — FACILITY

9201 7HIS 85100

South Carolina Department of Health and Environm ntal Control

6612

16

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 3385
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OKD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01848-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 444
WO#:
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
GARY L. CRAWFORD	Gary L Crawford	07	26	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Dewie Winter	Dewie Winter	07	26	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

Discrepancy Indication Space
237271

a. 48900 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
A. Anderson	David Anderson	07	26	99

South Carolina Departm nt of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13386
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D003
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01B48-11012
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GARY L CRAWFORD — Signature — Month 07 Day 27 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature — Month 07 Day 27 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237274

a. 44600 lbs. c. lbs.
b. lbs d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

8:33 26 9208HH02

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 1338 7
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD083134 09

C. State Transporter's ID
D. Transporter's Phone: 800 423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #401
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
HC843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Gary L. Crawford | Signature: Gary L. Crawford | Month 07 Day 27 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney | Signature: Hubert Muckelvaney | Month 07 Day 27 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
23275
a. 44200 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson | Signature: David Anderson | Month Day Year

18LICU 9208HH03

South Carolina D partment of Health and Environmental Control

10.28

28

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: S C 0 1 7 0 0 2 2 5 6 0
Manifest Document No.: 1 3 3 8 8

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H 0 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BAB-11012
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Trailer # 444
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford 843-743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson
Signature: Lillie D. Frierson
Month Day Year: 07 27 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER
Signature: David Winter
Month Day Year: 07 27 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237276

a. 42420 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

9208 HHCA 86840

South Carolina Department of Health and Environmental Control

10:19

32

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13389
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD088913409

C. State Transporter's ID
D. Transporter's Phone 800-423-8111

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D003
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
Trailer #460
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
Bid/843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month 07 Day 27 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle | Signature: John Eagle | Month 07 Day 29 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237277
a. 53780 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13390

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
OHD068913409

C. State Transporter's ID

D. Transporter's Phone 800-423-[illegible]

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
SCD070375985

G. State Facility's ID

H. Facility's Phone (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-011BAB-111012
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information Trailer #310

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
843 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16 **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 07 27 99

TRANSPORT

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stanley Garvain | Signature: Stanley Garvain | Month Day Year: 07 27 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
82 337 278

a. 48000 lbs. c. lbs.
b. lbs. d. lbs

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

Printed/Typed Name | Signature | Month Day Year

841000 9208HH06

South Carolina Department of Health and Environmental Control

11:03 36

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 13391

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985 D.H.

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-6184

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information — trailer #331

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (~~803~~) 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month 07 Day 27 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Don Houston — Signature: Don Houston — Month 07 Day 27 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
23279

a. 50160 lbs. c. lbs.
b. lbs. d. lbs.

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

South Carolina Department of Health and Environmental Control

9208Hi'07

39

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13392

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-0181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	0 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 07 27 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: Jerry Smith — Month Day Year: 07 27 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237280

a. 46920 lbs. c. lbs.
b. lbs. d. lbs

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

Printed/Typed Name — Signature — Month Day Year

South Carolina Departm nt of H alth and Environmental Control

13.43 40

4208HH

Bureau of Solid & H. ardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13393

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone Hm843 (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #401
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
Hm843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 07 27 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Meckelvaney — Signature: Hubert Meckelvaney — Month Day Year: 07 27 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237287

a. 48820 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson — Signature: Aaron Anderson — Month Day Year: 07 27 99

South Carolina D partment of H alth and Environmental Control

9208HR 29

Bureau of Solid & H ardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

6-11 10

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13394
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	0008
b.					
c.					
d.					

Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information
TRAILER #444
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
Day 803 843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 07 27 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month Day Year: 07 27 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237284

a. 37460 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D Anderson | Signature: David Anderson | Month Day Year: 07 28 99

9208HH10 1 8 8 5 0

South Carolina Department of Health and Environmental Control

7:032 (11)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13395
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-0181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 803-432-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
7. Transporter 2 Company Name
8. U.S. EPA ID Number
9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc., Rt 1 Box 255, Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #460
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
Stuff 843 (~~803~~) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 07 27 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Fergle | Signature | Month Day Year: 07 27 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237287
a. 45180 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson | Signature: A. Anderson | Month Day Year: 07 28 99

South Carolina Departm nt of Health and Environmental Control

6:04 (8) 9208HH

Bureau of Solid & Haz. ous Waste Mgt.
2600 Bull Street, Colum. a, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13396

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone ~~(803)~~ 843 BL 743-9985 D. H.

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kl en (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
SCD070375985

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y
b.				
c.				
d.				

Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b. ___-_____-_____
c. ___-_____-_____
d. ___-_____-_____

15. Special Handling Instructions and Additional Information
TRAILER # 331
D.H.
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
BL 843 ~~(803)~~ 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., SW, Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: BILL LACHICOTTE | Signature: Bill Lachicotte | Month Day Year: 07 27 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston | Signature: Don Houston | Month Day Year: 07 27 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237284

a. 53360 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Andrews | Signature: April Andrews | Month Day Year

South Carolina Department of Health and Environmental Control

6.07 (9) 920. 4H12

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 13397
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843 ~~803~~) 743-9985 BL

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

Additional Descriptions for Materials Listed Above

a. PW-01848-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER #310

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
843 ~~(803)~~ 743-9985 BL

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: BILL LACHICOTTE — Signature: Bill Lachicotte — Month Day Year: 07 27 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 07 27 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
Q37285
a. 52220 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson — Signature: David Anderson — Month Day Year: 07 28 99

82340 9208HH13

South Carolina Department of Health and Environmental Control

6:02

7

Bureau of Solid & Haz dous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 017002256011 Manifest Document No. 33918
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (~~803~~) 743-9985 843 BL HM

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

Additional Descriptions for Materials Listed Above

a. PW-01345-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER # 401

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
HM 843 ~~(803)~~ 743-9985 BL

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: W F LACHICOTTE III
Signature: W F Lachicotte III
Month Day Year: 07 27 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney
Signature: Hubert Muckelvaney
Month Day Year: 07 27 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

19. Discrepancy Indication Space
237283

a. 49320 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

1 1000 9208HH14

South Carolina Department of Health and Environmental Control

5.59

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC0170022560 Manifest Document No. 13399

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone ~~803~~ 843) 743-9985 WRL

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

Additional Descriptions for Materials Listed Above

a. PW-01B4B-11102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER # 373

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
843 ~~(803)~~ 743-9985 WRL

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: WF LACHICOTTE III | Signature: WF Lachicotte III | Month 07 Day 27 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith | Signature: Jerry Smith | Month 07 Day 27 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237282

a. 45300 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name | Signature | Month Day Year

4204 HH01 18000

South Carolina Departm nt of Health and Environmental Control

(12)

10:11

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13400
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone ~~803~~ 843 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

Transporter's ID

Transporter's Phone 800-[illegible]

7. Transporter 2 Company Name
8. U.S. EPA ID Number

Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

Facility's ID

Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	0008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BAB-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 373

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(~~803~~ 843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G NIELSON | Signature: [signature] | Month 07 Day 28 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith | Signature: [signature] | Month 07 Day 28 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237288

a. ____ lbs. c. ____ lbs.
b. ____ lbs. d. ____ lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

4209HH02 7560

South Carolina Department of Health and Environmental Control

10:43 (14)

Bureau of Solid & Hazardous Waste Mg.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13401
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-013948-11012
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 413

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
~~NA (803)~~ 843 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name	Signature	Month	Day	Year
RICHARD G. NIELSON	[signature]	07	28	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jimmy Dorr	[signature]	07	28	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space
237289

a. 38300 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]			

9209HH03 X 15

South Carolina Department of Health and Environmental Control

11:32 21

Bureau of Solid & Hazardous Waste Mg
2600 Bull Street, Columbia, S 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 4 0 2

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 HM

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. Transporter's Phone
F. State Facility's ID
G. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 8 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 401

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
HM ~~(803)~~ 843 743-9985

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 0 7 2 8 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney — Signature: Hubert Muckelvaney — Month Day Year: 0 7 2 8 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237293

a. 47560 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9209HH04 18a

South Carolina Department of Health and Environmental Control

16

Bureau of Solid & Hazardous Waste Mgt
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

1048

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 017002256 01 Manifest Document No. 134 03
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 D.H.

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d					

J. Additional Descriptions for Materials Listed Above
a. PW-01B43-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 331

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
~~803~~ 843 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G NIELSON | Signature: [signature] | Month Day Year: 07 28 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston | Signature: Don Houston | Month Day Year: 07 28 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space 237290

a. 44380 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: D Anderson | Signature: [signature] | Month Day Year

South Carolina D partment of Health and Environmental Control

10.45 (15)

Bureau of Solid & Hazard s Waste Mgt.
2600 Bull Street, Columbia SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (80 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017010225601 Manifest Document No. 34014
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD073705985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01345-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 310

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
~~(803)~~ 843 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHMOND G NIELSON | Signature: [signature] | Month Day Year: 07 28 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Hamai | Signature: Stanley Hamai | Month Day Year: 07 28 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237289
a. 49920 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson | Signature: David Anderson | Month Day Year: 07 28 99

South Carolina Department of Health and Environmental Control

11:10 (18)

Bureau of Solid & Hazardous Waste M
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13405
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H 0 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	DT	30	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #444
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name	Signature	Month	Day	Year
RICHARD G. NIELSON	[signature]	07	28	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
DAVID WINTER	David Winter	07	28	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

Discrepancy Indication Space
2307292

a. 40420 lbs. c. lbs
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
H. Anderson	[signature]	07	27	99

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

11:30

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13406
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone: 800-423-8161
State Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone (803) 452-6003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 460

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month Day Year: 07 28 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle | Signature: [signature] | Month Day Year: 07 28 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
23729
a. 48380 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson | Signature: [signature] | Month Day Year

South Carolina Department of Health and Environmental Control

75986 26

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 1 — Manifest Document No. 13407
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	0 0 0 8
b.					
c.					

a. P W - 0 1 3 4 B - 1 1 0 2
b.
c.
d.

15. Special Handling Instructions and Additional Information
TRAILER #413

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 0 7 2 8 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr — Signature: [signature] — Month Day Year: 0 7 2 8 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237296

a. 40860 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Ben Justice — Signature: [signature] — Month Day Year: 07 29 99

South Carolina Department of Health and Environmental Control

77140 25

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13408
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD006913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	008
b.					
c.					

Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b. -
c. -
d. -

15. Special Handling Instructions and Additional Information TRAILER # 373

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
~~(803)~~ 843 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON Signature: [signature] Month Day Year: 07 28 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith Signature: [signature] Month Day Year: 07 28 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name Signature Month Day Year

FACILITY

Discrepancy Indication Space
237295

a. 45700 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Tom Justice Signature: [signature] Month Day Year: 07 28 99

South Carolina Departm nt of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13409
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD007037598 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #310
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature — Month Day Year: 07 28 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature — Month Day Year: 07 28 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237297
a. 51180 lbs. c. lbs
b. lbs d. lbs

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jim Justice — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13410
2. Page 1 of 1

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

3. Generator's Name and Mailing Address: SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (~~803~~ 843) 743-9985 D.H.
5. Transporter 1 Company Name: Wills Trucking, Inc. — 6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9
7. Transporter 2 Company Name — 8. U.S. EPA ID Number
9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc., Rt 1 Box 255, Pinewood, South Carolina 29125 — 10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID 800 425 5181
D. Transporter's Phone
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 01	D T	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 0343 - 1102
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information: TRAILER # 331

WO# ___

24 hour emergency contact: Rick Nielson or Gary Crawford

~~(803)~~ 843 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 07 Day 28 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DON HOUSTON — Signature: Don Houston — Month 07 Day 28 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space: 237298

a. 49760 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

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

Printed/Typed Name: (Jon Justice) — Signature: [signature] — Month Day Year

4209HH12 12/1/00

South Carolina Department of Health and Environmental Control

(12)

7:26

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

'IFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 — Manifest Document No. 13411
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-9101
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-8003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
7. Transporter 2 Company Name
8. U.S. EPA ID Number
9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc., Rt 1 Box 255, Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01345-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 444
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(~~803~~ 843) 743-9985

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GENERATOR

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 07 Day 28 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month 07 Day 28 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237300
a. 37460 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator, Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name — Signature — Month Day Year

9209HH13 84100

South Carolina Department of Health and Environmental Control

7:24 (10)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050/0039 Expires 9-30-99

IIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13412
2. Page 1 of 1

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

3. Generator's Name and Mailing Address: SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (~~803~~ 843 743-9985 Hm.

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. State Transporter's Phone
E. State Transporter's ID
F. State Transporter's Phone
G. State Facility's ID
H. State Facility's Phone (843) 452-5003

5. Transporter 1 Company Name: Mills Trucking, Inc.
6. U.S. EPA ID Number: OHD063913409
7. Transporter 2 Company Name
8. U.S. EPA ID Number
9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc. Rt 1 Box 255 Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW 01343 1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 401

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
Hm ~~(803)~~ 843 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month 07 Day 28 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert McCleaney | Signature: Hubert McCleaney | Month 07 Day 28 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237299

a. 51360 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13413
2. Page 1 of 1

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

3. Generator's Name and Mailing Address: SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID 800 423 8481
D. Transporter's Phone
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Mills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
7. Transporter 2 Company Name
8. U.S. EPA ID Number
9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc., Rt 1 Box 255, Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-013443-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #460
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD | Signature: [signature] | Month 07 Day 28 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Earghe | Signature: [signature] | Month 07 Day 27 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237301
a. 47980 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Dodson | Signature: [signature] | Month Day Year

9210 HH01 77420

South Carolina Department of Health and Environmental Control

8:40 21

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 13414
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID 800-423-0181
D. Transporter's Phone
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
7. Transporter 2 Company Name
8. U.S. EPA ID Number
9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc., Rt 1 Box 255, Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-013A3-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
803 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month 07 Day 29 Year 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: Jerry Smith — Month 07 Day 29 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
237303
a. 45680 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature

GENERATOR — TRANSPORTER — FACILITY

9210HH027814C

South Carolina Department of Health and Environmental Control

8:42

23

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13415

2. Page 1 of 1

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

3. Generator's Name and Mailing Address: SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 MC JP

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Mills Trucking, Inc.

6. U.S. EPA ID Number: OHD088913409

C. State Transporter's ID 800-423-8181

D. Transporter's Phone

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102

b.

c.

d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information

Trailer #413

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
JP MC 843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 07 Day 29 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jimmy Dorr | Signature: Jimmy Dorr | Month 07 Day 29 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space

237304

a. 42480 lbs. c. lbs.

b. lbs. d lbs

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

Printed/Typed Name | Signature | Month Day Year

9210H403 18000

South Carolina Department of Health and Environmental Control

8:37 (18)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13416

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone 843 ~~803~~) 743-9985 A. H.

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8191

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BA8-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 310
WO # _____
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (~~803~~) 743-9985 A. H.

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 07 Day 29 Year 99

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stanley Garvain | Signature: Stanley Garvain | Month 07 Day 29 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

Discrepancy Indication Space
237302

a. 47240 lbs. c. lbs.
b. lbs d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

FACILITY

9210HH048094

South Carolina Department of Health and Environmental Control

2S

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13417

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985 D.H.

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone
(803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01348 - 11102
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 331
WO # ___
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (803) 743-9985 D.H.

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Printed/Typed Name	Signature	Month	Day	Year
Gary L Crawford	Gary L Crawford	07	29	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Don Houston	Don Houston	07	29	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space
23730S

a. 47300 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

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

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

83400 9210HH05

South Carolina Departm nt of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

11:57

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

IFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13418
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD063913409

C. State Transporter's ID
D. Transporter's Phone 800-423-6181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information
TRAILER #460
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

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Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 07 29 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle | Signature | Month Day Year: 07 29 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space
237306
a. 50100 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

GENERATOR

South Carolina Department of Health and Environmental Control

12:00 (30)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13419
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD063913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-013A3-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #444
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 07 29 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month Day Year: 07 29 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237307
a. 44480 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson | Signature: April Anderson | Month Day Year: 07 29 99

4210 HHU/1 1720

South Carolina Department of Health and Environmental Control

12:27

32

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13420
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BA8-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #401
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
H/M, 843 (~~803~~) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name	Signature	Month	Day	Year
Lillie D. Frierson	Lillie D. Frierson	07	29	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Hubert Meckewaney	Hubert Meckewaney	07	29	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

Discrepancy Indication Space
237308

a. 43840 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
D. Anderson	David Anderson	07	29	99

GENERATOR

TRANSPORTER

FACILITY

South Carolina Departm nt of H alth and Environm ntal Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 13421
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BA8-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 310
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 07 29 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 07 29 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
237309
a. 52260 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson — Signature: A. Anderson — Month Day Year

South Carolina Department of Health and Environmental Control

9210HHUT

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 4 2 2

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 432-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 B 4 B - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ON SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #413
WO #
24 hour emergency contact: Rick Nielson or Gary Crawford
843 pdf (843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 07 29 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr — Signature: Jimmy Dorr — Month Day Year: 07 29 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237311

a. 50660 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jane Justice — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

7210HH40

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

78180

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13423
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 D.H.

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-013AB-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #331

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
843 ~~(803)~~ 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name	Signature	Month Day Year
Lillie D. Frierson	Lillie D. Frierson	07 29 99

TRANS

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
Don Houston	Don Houston	07 29 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

Discrepancy Indication Space
237310

a. 43160 lbs. c. lbs.
b. lbs d. lbs.

Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month Day Year
D. Anderson	David Anderson	07 29 99

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC0170022256 Manifest Document No. 134724

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD017035185

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01345-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
~~803~~ 843 ~~743-9985~~

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 07 29 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith | Signature | Month Day Year: 07 29 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237312
a. 45800 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Dodson | Signature | Month Day Year

885600

09210HH12

South Carolina Department of Health and Environmental Control

6:03

(15)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC0170022556 Manifest Document No. 13425

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843 ~~803~~) 743-9985 BL

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone 800-422-8381

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 460

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
843 ~~(803)~~ 743-9985 BL

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: WILLIAM F LACHICOTTE III
Signature: WF Lachicotte III
Month 07 Day 29 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Fangle
Signature: John Fangle
Month 07 Day 29 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237313

a. 54820 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

00 100 042104413

South Carolina Department of Health and Environmental Control

6:13 24

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 1346

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8183
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc. — 6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name — 8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-011BNB-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 444
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 07 29 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month Day Year: 07 29 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237316

a. 46620 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

18100

09210HH14

South Carolina Department of Health and Environm ntal Control

18

6:06

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13427
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985 BL

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
7. Transporter 2 Company Name
8. U.S. EPA ID Number
9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc., Rt 1 Box 255, Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 401

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
H/m BL 843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: BILL LACHICOTTE — Signature: Bill Lachicotte — Month Day Year: 07 29 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert McKelvaney — Signature: Hubert McKelvaney — Month Day Year: 07 29 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space: 237314

a. 45100 lbs. c. ____ lbs.
b. ____ lbs. d. ____ lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

8430

09210 HH15

South Carolina D partment of Health and Environmental Control

23

6:11

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

IFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 4 2 8

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 BL D.H.

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: 832-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2

b. ___ - ___ - ___

c. ___ - ___ - ___

d. ___ - ___ - ___

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 331

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
BL 843 (~~803~~) 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month 07 Day 29 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Don Houston — Signature: Don Houston — Month 07 Day 29 Year 99

18 Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space: 237270

a. 503600 lbs. c. ___ lbs.

b. ___ lbs. d. ___ lbs

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

Printed/Typed Name — Signature — Month Day Year

10420 04210HH16

South Carolina Departm nt of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

25

6:17

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 4 2 9

2. Page 1 of 1

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3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843 ~~803~~) 743-9985 BL

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 803-423-0161
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 6 4 8 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 413

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
843 (803) 743-9985 BL

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Printed/Typed Name	Signature	Month	Day	Year
W F LACHICOTTE III	W F Lachicotte III	0 7	2 9	9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jimmy Darr	Jimmy Darr	0 7	2 9	9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

Discrepancy Indication Space
237317

a. 41220 lbs. c. _____ lbs
b. _____ lbs. d _____ lbs

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

Printed/Typed Name	Signature	Month	Day	Year
D Anderson	David Anderson	07	30	99

South Carolina D partment of Health and Environmental Control

6:09

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 013430
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843 ~~803~~) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-6101

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BA8-11012
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 310
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
BL 843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III
Signature: WF Lachicotte III
Month Day Year: 07 29 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garrain
Signature: Stanley Garrain
Month Day Year: 07 29 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
2373158
a. 51280 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson
Signature: Doug Anderson
Month Day Year: 07 30 99

South Carolina Department of Health and Environmental Control

10:32 (32) 9211HH01

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 1343 1
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-013448-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
Trailer # 468
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
SC 843 (803) 743-9985

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Printed/Typed Name: GARY L CRAWFORD — Signature: [signature] — Month 07 Day 30 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Fargle — Signature: [signature] — Month 07 Day 30 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237319
a. 396060 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Dodson — Signature — Month Day Year 07 30 99

9211HH02

South Carolina Department of Health and Environmental Control

10:59 (38)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 13432
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: G L CRAWFORD — Signature — Month 07 Day 30 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature — Month 07 Day 30 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
237320
a. 449160 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina D partment of Health and Environmental Control

9211HH03

11:23

41

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13433

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 S.R.

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8191

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: 803 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #310
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (803) 743-9985 S.R.

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: GARY L CRAWFORD — Signature: [signature] — Month 07 Day 30 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stanley Garvain — Signature: [signature] — Month 07 Day 30 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237322

a. 50540 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: D Anderson — Signature: David Anderson — Month 07 Day 30 Year 99

South Carolina Department of Health and Environmental Control

12:01 (44)

4211 HH04

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13434

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-0181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BAB-11012
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 401
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
HM 843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: Gary L Crawford — Signature: Gary L Crawford — Month Day Year: 07 30 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hubert Mickelvaney — Signature: Hubert Mickelvaney — Month Day Year: 07 30 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
23732 84

a. lbs. c. lbs
b. lbs. d. lbs

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

Printed/Typed Name: A. Anderson — Signature: April Anderson — Month Day Year: 07 30 99

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 4 3 5
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9
7. Transporter 2 Company Name
8. U.S. EPA ID Number
9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc., Rt 1 Box 255, Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 B A 8 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 444
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Gary L Crawford — Signature: Gary L Crawford — Month 0 7 Day 3 0 Year 9 9

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month 0 7 Day 3 0 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237321
a. 40300 lbs. c. lbs.
b. lbs d lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

81940

9211 HH06

South Carolina Department of Health and Environmental Control

11:35

(42)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13436
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985 D.H.

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01B4B-11012
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENT

15. Special Handling Instructions and Additional Information
Trailer #331
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD
Signature: Gary L Crawford
Month Day Year: 07 30 95

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston
Signature: Don Houston
Month Day Year: 07 30 95

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237323
a. 48040 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

1540 9211 HH07

South Carolina D partm nt of Health and Environmental Control

11:59 43

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13437
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8161
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 462-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01848-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #413
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
#1843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: G. L. CRAWFORD | Signature: Gary L Crawford | Month Day Year: 07 30 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Derr | Signature: Jimmy Derr | Month Day Year: 07 30 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
23732X5
a. lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

South Carolina Departm nt of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13438
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8161

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-0143-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER 4600
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Gary L Crawford — Signature: [signature] — Month 07 Day 30 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle — Signature: [signature] — Month 07 Day 30 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237327
a. 49460 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice — Signature: [signature] — Month 07 Day 31 Year 99

9211HH09

South Carolina Department of Health and Environmental Control

76500

15

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13439

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985 #4843

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 B A B - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
#4843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GL CRAWFORD — Signature: [signature] — Month Day Year: 07 30 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: [signature] — Month Day Year: 07 30 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237326

a. 4480 lbs. c. lbs.
b. lbs. d. lbs

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9211 HH 10

South Carolina Departm nt of Health and Environmental Control

81160 20

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13441

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER 444
WO #
24 hour emergency contact: Rick Nielson or Gary Crawford
FC843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 87 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 07 Day 30 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month 07 Day 30 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237329

a. 45520 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

South Carolina Department of Health and Environmental Control

24

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 4 4 2

2. Page 1 of 1

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

GENERATOR

Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985 jr 843

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 B A B - 1 1 1 0 1 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 413
WO # _____
24 hour emergency contact: Rick Nielson or Gary Crawford
jr 843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 0 7 Day 3 0 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr | Signature: Jimmy Dorr | Month 0 7 Day 3 0 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237332
a. 41960 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice | Signature: Jan Justice | Month 0 7 Day 3 0 Year 9 9

EPA Form 8700 (Rev. 9/88) Previous Editions are Obsolete (DHEC 1988 (Rev. 5/89))

FACILITY: DETACH AND RETAIN THIS COPY FOR YOUR RECORDS

South Carolina Department of Health and Environmental Control

80360

9211HH12

18

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 13443

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

HMMC843

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
OHD068913409

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
SCD070375985

G. State Facility's ID

H. Facility's Phone (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

TRAILER # 401

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
HMMC843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month 07 Day 30 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney — Signature: Hubert Muckelvaney — Month 07 Day 30 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237328

a. 46880 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

8044C 23

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13444

2. Page 1 of 1

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

Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985 AC843 L.R.

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER 310
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
AC843 (803) 743-9985 L.R.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GL Crawford | Signature: [signature] | Month 07 Day 30 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stanley Garvain | Signature: Stanley Garvain | Month 07 Day 30 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
a. 49420 lbs. c. lbs
b. lbs d. lbs.
237331

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

Printed/Typed Name: Jan Justice | Signature: Jan Justice | Month 07 Day 31 Year 99

EPA Form 8700 (Rev. 9/88) Previous Editions are Obsolete (DHEC 1988 (Rev. 5/89))

FACILITY: DETACH AND RETAIN THIS COPY FOR YOUR RECORDS

South Carolina D partm nt of Health and Environmental Control

81720 21

9211HM17

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 13445
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985 D.H.

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01B4B-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILOR 331
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: Gary L Crawford — Signature: Gary L Crawford — Month 07 Day 30 Year 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston — Signature: Don Houston — Month 07 Day 30 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237330
a. 48280 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Don Justice — Signature — Month Day Year 07 30 99

South Carolina Department of Health and Environmental Control

7:43 (14)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13446
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
(CB) 742843
4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD006891340 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SC007037598 5

G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-013AB-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTION S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #4456
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(CB) 742843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month Day Year: 07 30 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL BURGESS | Signature: Carl Burgess | Month Day Year: 07 30 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237345
a. 48080 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A Andrews | Signature: Avin Andrews | Month Day Year: 08 03 99

South Carolina Department of Health and Environmental Control

7212MH01

25

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

7470

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13447
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone: (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01 3 A B-1 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #444
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
Lillie D. Frierson	Lillie D. Frierson	07	31	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
DAVID WINTER	David Winter	07	31	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

Discrepancy Indication Space
237333

a. 39300 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
(Justice)	(Justice)	07	31	99

9212HH02

South Carolina Department of Health and Environmental Control

7936 26

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13448
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843 ed) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PIW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
843 ed (~~803~~) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 07 31 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith | Signature | Month Day Year: 07 31 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237334
a. 47780 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9212 HH 03

South Carolina Departm nt of Health and Environmental Control

81560

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Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13449

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #401
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
HM843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Friersen | Signature: Lillie D. Friersen | Month Day Year: 07 31 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Merkelvaney | Signature: Hubert Merkelvaney | Month Day Year: 07 31 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237337

a. 48200 lbs. c. lbs
b. lbs d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jon Justice | Signature: Jon Justice | Month Day Year: 07 31 99

9212##04

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

7086 27

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13450
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) ~~(803)~~ 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01B4B-11012
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #460
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Emerson | Signature: Lillie D. Emerson | Month Day Year: 07 31 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle | Signature: John Eagle | Month Day Year: 07 31 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237335
a. 37920 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Joe Justice | Signature | Month Day Year: 07 31 99

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1345

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #310
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
ref 843 (~~803~~) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 07 31 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 07 31 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237336

a. 50420 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Don Justice — Signature — Month Day Year: 07 31 99

4212HTT06

South Carolina Department of Health and Environmental Control

85880 30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 4 5 2

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985 D.H. 843 746

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 0 1 B 4 8 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #331
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (803) 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 13 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 07 31 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston — Signature: Don Houston — Month Day Year: 07 31 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237338
a. 52600 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13453
2. Page 1 of 1

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3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BAB-11012
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #413
WO #
24 hour emergency contact: Rick Nielson or Gary Crawford
Jc. 1843 (803) 743-9985

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 07 31 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr — Signature: Jimmy Dorr — Month Day Year: 07 31 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237339

a. 40500 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator, Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jon Justice — Signature — Month Day Year

16540 4212HH00

South Carolina Department of Health and Environmental Control

7:32 (2)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13454
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD006891340 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-8161

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD073759185

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	310	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information

TRAILER #373

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
843-743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 07 31 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: Jerry Smith — Month Day Year: 07 31 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
237340
a. 45280 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Signature — Month Day Year

18380 9212HH07

South Carolina Department of Health and Environmental Control

7:41 (11)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13435
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #460
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: Lillie D. Friersen — Signature: Lillie D. Friersen — Month Day Year: 07 31 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle — Signature: John Eagle — Month Day Year: 07 31 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237344
a. 45180 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13456
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone ~~803~~ 843 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-0188-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #401
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
HM 843 743-9985 (803)

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name	Signature	Month	Day	Year
Lillie D. Frierson	Lillie D. Frierson	07	31	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Hubert Muckelvaney	Hubert Muckelvaney	07	31	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

Discrepancy Indication Space
237341

a. 50000 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year

South Carolina D partm nt of Health and Environm ntal Control

7-35 (10)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: SC017002256 — Manifest Document No.: 13457
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #310
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 07 31 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 07 31 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237343
a. 51620 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13458
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01 B 4 B - 1 1 1 0 2
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR SC DEPT OF HEALTH AND ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 413
WO# ___
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (~~803~~) 743-9985

Public reporting burden for this collection of information is estimated to average: 67 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
Lillie D. Frierson	Lillie D. Frierson	0 7	3 1	9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jimmy Dorr	Jimmy Dorr	0 7	3 1	9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

Discrepancy Indication Space
237349

a. 43180 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

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

Printed/Typed Name	Signature	Month	Day	Year

9214HH01

South Carolina Department of Health and Environmental Control

9:03 (15)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13459
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 D.H.

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8164

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BAB-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH AND ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER 400

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
~~803~~ 843 (803) 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 08 Day 02 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DON HOUSTON | Signature: Don Houston | Month 08 Day 02 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237346

a. 40040 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson | Signature: Paul Anderson | Month 08 Day 02 Year 99

South Carolina Department of Health and Environmental Control

9214HH02

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13460
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD069134099

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PIW-01348-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER 415
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average, 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GARY L CRAWFORD | Signature: [signature] | Month Day Year: 08 02 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: [signature] | Month Day Year: 08 02 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

Discrepancy Indication Space
237347
a. 33800 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A Anderson | Signature: [signature] | Month Day Year

12:20 PA20 9214HH04

South Carolina Departm nt of Health and Environmental Control

56

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13462
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985 FAX 743

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone: 800-425-8101
State Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTION DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
FAX 743 (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 08 Day 02 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith | Signature: Jerry Smith | Month 08 Day 02 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237348
a. 48360 lbs. c. lbs.
b. lbs d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

00340

4214 HHOS

South Carolina Department of Health and Environmental Control

12:25

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13463

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone: 800-423-[illegible]
State Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	J. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BAB-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 413
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
DET #2843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD — Signature: [signature] — Month Day Year: 08 02 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr — Signature: [signature] — Month Day Year: 08 02 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
237349
a. 45240 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

12:53 (28) 4214HW06

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13464
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-9181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BAB-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 460
WO # _____
24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: G. L. Crawford — Signature: Gary L Crawford — Month Day Year: 08 02 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle — Signature: John Eagle — Month Day Year: 08 02 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237350
a. 43700 lbs. c. _____ lbs.
b. _____ lbs. d. _____ lbs

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A Anderson — Signature: A. Anderson — Month Day Year: 08 02 99

South Carolina Department of Health and Environmental Control

13:33 36

4214HH01

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13465
2. Page 1 of 1

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

A. State Manifest Document Number

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone (803) 452-5003

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BAB-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH

15. Special Handling Instructions and Additional Information
TRAILER # 401
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
HM 42843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: G L Crawford | Signature | Month Day Year: 08 02 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hibert Mickelvaney | Signature | Month Day Year: 08 02 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237358

a. 39520 lbs. c. lbs
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D Anderson | Signature | Month Day Year

South Carolina Department of Health and Environm ntal Control

13:19 29

4214HH08

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13466

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985 S.G.

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01848-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT OF HEALTH

15. Special Handling Instructions and Additional Information
TRAILER # 310
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (803) 743-9985 S.G.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: G.L. CRAWFORD | Signature: Gary L Crawford | Month Day Year: 08 02 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Carvain | Signature: Stanley Carvain | Month Day Year: 08 02 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
23735

a. 51140 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

4 LIY #1704

South Carolina Department of Health and Environmental Control

13:23 (30)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 01346 7
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985 D.H.

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter Phone: 800-823-8181
State Transporter's ID
Transporter Phone
State Facility's ID
Facility Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #400
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (803) 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: G. L. CRAWFORD | Signature: G. L. Crawford | Month 08 Day 02 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DON HOUSTON | Signature: Don Houston | Month 08 Day 02 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237358
a. 45680 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson | Signature: David D. Anderson | Month 08 Day 02 Year 99

10790 4214HH10

South Carolina Department of Health and Environmental Control

13:34 (37)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: SC017002256 0 Manifest Document No.: 13468
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01848-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #415
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
#C847 (803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GARY L. CRAWFORD | Signature: Gary L Crawford | Month 08 Day 02 Year 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month 08 Day 02 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

Discrepancy Indication Space
237354
a. 43980 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

GENERATOR
TRANSPORTER
FACILITY

South Carolina Department of Health and Environmental Control

6.09

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 3469
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-6161
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01B48-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: RICHARD G. NIELSON
Signature: Richard G. Nielson
Month Day Year: 08 02 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith
Signature: Jerry Smith
Month Day Year: 08 02 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

19. Discrepancy Indication Space
237359
a. 46320 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson
Signature: April Anderson
Month Day Year: 08 03 99

South Carolina Department of Health and Environmental Control

6:19 (15)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13470
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01B08-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 413
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month 08 Day 02 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Timmy Darr | Signature: [signature] | Month 08 Day 02 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237355

a. 43500 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D Anderson | Signature: [signature] | Month 08 Day 03 Year 99

80640 9214HH13

South Carolina Department of Health and Environmental Control

(14)

6.17

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 3471

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 D.H.

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number OHD068913409

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number SCD070375985

G. State Facility's ID

H. Facility's Phone (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW-01BA3-1102

b.

c.

d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 400

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(~~803~~ 843) 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 60 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month 08 Day 02 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DON Houston | Signature: Don Houston | Month 08 Day 02 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237356

a. 48100 lbs. c. lbs.

b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

South Carolina Department of Health and Environmental Control

6.44 (12)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13472
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OH0068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8161
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information: TRAILER #310

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average 87 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Richard G Nielson — Signature: [signature] — Month Day Year: 08 02 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garrain — Signature: Stanley Garrain — Month Day Year: 08 02 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space: 237357

a. 49680 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: G. Anderson — Signature: Gail Anderson — Month Day Year: 08 03 99

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC0170022515 Manifest Document No. 13473

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~) 743-9985

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
SCD070375985

A. State Manifest Document Number

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 401
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
HM ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON
Signature: [signature]
Month Day Year: 08 02 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney
Signature: Hubert Muckelvaney
Month Day Year: 08 02 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237358

a. 45580 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson
Signature
Month Day Year

81080 9215HH01

South Carolina Department of Health and Environmental Control

8:33 (18)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 4 7 4
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRACON # 460

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G NIELSON — Signature — Month 08 Day 03 Year 99

TRANSPORT

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle — Signature — Month 08 Day 03 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
237360
a. 474600 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

11 100

8:35

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

9215HH02

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13475
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	0008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-0138-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
DEPARTMENT OF HEALTH

15. Special Handling Instructions and Additional Information TRAILER # 415

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 48 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G NIELSON | Signature | Month 08 Day 03 Year 98

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature | Month 08 Day 03 Year 98

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237361

a. 41720 lbs. c. lbs.
b. lbs. d lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

15960 9215 HH03

South Carolina Department of Health and Environmental Control

10:48 23

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13476

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 BL

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 8 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S C DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 373

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
BL 843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WILLIAM F LACHICOTTE III — Signature: W F Lachicotte III — Month Day Year: 08 03 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: Jerry Smith — Month Day Year: 08 03 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237362

a. 44380 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

11:00 25

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13477
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (Hm) 843 ~~803~~) 743-9985 BL

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01843-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
SC DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 401

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
Hm BL 843 (~~803~~) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WILLIAM F LACHICOTTE III
Signature: W7 Lachicotte III
Month Day Year: 08 03 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckeirarney
Signature: Hubert Muckelvaney
Month Day Year: 08 03 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
2373604

a. 45280 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D Anderson
Signature: David Anderson
Month Day Year: 08 03 99

18000 9215HH05

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

10:51 64

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13478
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01 3 8 8 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 413

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name	Signature	Month	Day	Year
WILLIAM F LACHICOTTE III	W F Lachicotte III	08	03	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jimmy Dorr	Jimmy Dorr	08	03	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

Discrepancy Indication Space
2373363

a. 42540 lbs. c. lbs
b. lbs. d. lbs

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

Printed/Typed Name	Signature	Month	Day	Year

0100 7215 HH06

South Carolina Department of Health and Environmental Control

11:08 26

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 4 7 9
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843 ~~803~~) 743-9985 DL

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01 B 4 B - 1 1 0 2
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 310

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
DL 843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WILLIAM F LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 08 03 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 08 03 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237365

a. 48860 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name — Signature — Month Day Year

MICU 9215 HH07 (27)

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 1348 0
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 BL D.H.

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 400
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
BL 843 ~~(803)~~ 743-9985 D.H.

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WILLIAM F LACHICOTTE III
Signature: WF Lachicotte III
Month Day Year: 08 03 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston
Signature: Don Houston
Month Day Year: 08 03 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
2373660
a. 43620 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D Anderson
Signature: David Anderson
Month Day Year

South Carolina Department of Health and Environmental Control

13:28 01460 1215 M440 30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 Manifest Document No. 1 3 4 8
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~) 743-9985 BL 843

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 B A B - 1 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR
S C DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 460
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
BL 843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average, 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: WF LACHICOTTE III
Signature: WF Lachicotte III
Month Day Year: 08 03 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle
Signature: John Eargle
Month Day Year: 08 03 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237367
a. 47960 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator, Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson
Signature: David Anderson
Month Day Year: 08 03 99

14500 9215HH09

South Carolina D partment of Health and Environm ntal Control

13:42 32

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 4 8 2

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (DM 843 ~~803~~) 743-9985 BL

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 B 4 3 - 1 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 415

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
DM 843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U S Environmental Protection Agency, 401 M St, S W, Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford

Printed/Typed Name: BILL LACHICOTTE — Signature: Bill Lachicotte — Month 08 Day 03 Year 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month 08 Day 03 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237368

a. 43520 lbs. c. lbs.
b. lbs. d. lbs

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

188 (00) 9215 #1710

South Carolina Department of Health and Environmental Control

15:19 36

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13483
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843 ~~803~~) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
843 ~~803~~ 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Bill Lachicotte
Signature: Bill Lachicotte
Month Day Year: 08 03 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith
Signature: Jerry Smith
Month Day Year: 08 03 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237369
a. 47540 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: G. Anderson
Signature: David Anderson
Month Day Year: 08 03 99

South Carolina Department of Health and Environmental Control

15-24 (37)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13484
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone JC 843 ~~803~~) 743-9985 BL

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
7. Transporter 2 Company Name
8. U.S. EPA ID Number
9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc., Rt 1 Box 255, Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01B43-11012
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information Trailer # 413

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
JC 843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: Bill LACHICOTTE
Signature: Bill Lachicotte
Month Day Year: 08 03 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Doar
Signature: Jimmy Doar
Month Day Year: 08 03 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space: 237370

a. 45020 lbs. c. lbs
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A Anderson
Signature: David Anderson
Month Day Year: 08 03 99

M040 9215 HH 12

South Carolina Department of Health and Environmental Control

15:35 (38)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13485
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843 ~~803~~) 743-9985 BL

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information Trailer # 310

WO#
24 hour emergency contact: Rick Nielson or Gary Crayford
843 ~~803~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: BILL LACHICOTTE
Signature: Bill Lachicotte
Month Day Year: 08 03 99

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain
Signature: Stanley Garvain
Month Day Year: 08 03 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

TRANSPORTER

Discrepancy Indication Space
237371

a. 48760 lbs. c. lbs.
b. lbs. d. lbs.

FACILITY

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

N100 9215 HH 13

South Carolina Department of Health and Environmental Control

15:38 39

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13486
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 BL D.H.

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01B48-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information Trailer # 400

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
843 ~~(803)~~ 743-9985 D.H.

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Printed/Typed Name: Bill Lachicotte — Signature: Bill Lachicotte — Month Day Year: 08 03 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston — Signature: Don Houston — Month Day Year: 08 03 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237372

a. 42840 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

05960

9215 HH14

South Carolina Department of Health and Environmental Control

15.55

40

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13487

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ Hm 843) 743-9985 BL

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01 B 4 8 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information trailer # 401

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
Hm 843 ~~(803)~~ 743-9985 BL

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Printed/Typed Name: BILL LACHICOTTE
Signature: Bill Lachicotte
Month Day Year: 08 03 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney
Signature: Hubert Muckelvaney
Month Day Year: 08 03 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237373

a. 50760 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

South Carolina D partment of Health and Environmental Control

7:20

7215 HH15

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13488

2. Page 1 of 1

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

State Manifest Document Number

State Generator's ID

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 90010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

State Transporter's Phone: 800-

7. Transporter 2 Company Name

8. U.S. EPA ID Number

Transporter 2's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Code
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. PW - 01348 - 1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #415

WO#

24 hour emergency contact Rick Nielson or Gary Crawford
843 ~~(803) 743-9985~~

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Printed/Typed Name: Bill Lachicotte | Signature: Bill Lachicotte | Month 08 Day 03 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month 08 Day 03 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237374

a. 41060 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: A Anderson | Signature: David Anderson | Month 08 Day 04 Year 99

South Carolina Departm nt of Health and Environmental Control

8.00 14

9216HH01

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

'NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13489

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information
TRAILER #310
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain | Signature: Stanley Garvain | Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237375

a. 46700 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: D. Dodson | Signature | Month Day Year

South Carolina Department of Health and Environmental Control

8:18 15

9216 HH02

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13490

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number
State Generator's ID
Transporter's ID
Transporter's Phone: 800-[illegible]
Transporter's Phone
Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Trailer #413
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 10 8 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Darr — Signature: Jimmy Darr — Month Day Year: 10 8 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237376

a. 43440 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

8155 (21) 7216 HH93

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13491
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Trailer #401
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Mckelvaney — Signature: Hubert Mckelvaney — Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
23739
a. 43720 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Clarke — Signature: Clarke — Month Day Year: 08 04 99

South Carolina Departm nt of H alth and Environmental Control

8:50

9216 HHOT

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13492

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Codes
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above — Handling Codes for Wastes Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

15. Special Handling Instructions and Additional Information

Trailer #331

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: Lillie D. Emerson — Signature: Lillie D. Emerson — Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Don Houston — Signature: Don Houston — Month Day Year: 05 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space

237378

a. 50720 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: D Anderson — Signature: David Anderson — Month Day Year: 08 04 99

South Carolina Department of Health and Environmental Control

8:21 (17)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13493
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
Transporter's
Transporter's Phone
Transporter's
Transporter's Phone
State Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

Handling Codes for Wastes Listed Above
PER DHEC ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
Trailer #373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson
Signature: Lillie D. Frierson
Month Day Year: 08 04 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith
Signature: Jerry Smith
Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

19. Discrepancy Indication Space
237377
a. 46040 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson
Signature: David Anderson
Month Day Year: 08 04 99

GENERATOR
TRANSPORTER
FACILITY

1540 9216HH06

South Carolina Department of Health and Environmental Control

9.50 (23)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13494
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

(803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

15. Special Handling Instructions and Additional Information Trailer #460

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 08 04 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Kaugle — Signature: [signature] — Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237380
a. 42180 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Departm nt of H alth and Environmental Control

77700

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 5 0 Manifest Document No. 1 3 4 9 5
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
0 H 0 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

a. P W - 0 1 6 4 8 - 1 1 0 2
b.
c.
d.

15. Special Handling Instructions and Additional Information
Trailer #415

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
843-743-9985

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Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 10 8 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month Day Year: 10 5 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237381

a. 41640 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: (Jan Justice) | Signature: Jan Justice | Month Day Year: 08 04 99

South Carolina Department of Health and Environmental Control

80380 26

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13496
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 B x 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

a. PW-01348-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information
Trailer # 310

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Lillie D. Friersen | Signature: Lillie D. Friersen | Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Barvain | Signature: Stanley Barvain | Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237382

a. 49220 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Ian Justice | Signature: Ian Justice | Month Day Year: 08 04 99

South Carolina Department of Health and Environmental Control

8256 30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & after hours: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13497
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985 (803) 843-14

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 B x 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	008
b.					
c.					
d.					

a. PW-01B4B-11102
b.
c.
d.

15. Special Handling Instructions and Additional Information
Trailer #413
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985 (803) 843-14

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data and completing and reviewing the form. Send comments regarding the burden estimate including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Lillie D. Friersen | Signature: Lillie D. Friersen | Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Darr | Signature: Jimmy Darr | Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237384
a. 47580 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice | Signature: Jan Justice | Month Day Year: 08 04 99

South Carolina Departm nt of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 4 9 8
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	0 0 0 8
b.					
c.					
d.					

a. P W - 0 1 3 4 8 - 1 1 0 2
b.
c.
d.

15. Special Handling Instructions and Additional Information
Trailer #373
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 45 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: Jerry Smith — Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237383

a. 45880 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice — Signature: Jan Justice — Month Day Year: 08 04 99

South Carolina Department of Health and Environmental Control

84540 33

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13999
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

ON SITE

a. PW-01348-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information
Trailer #31
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
843/(803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: Lillie D. Emerson | Signature: Lillie D. Emerson | Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston | Signature: Don Houston | Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
a. 50960 lbs. c. lbs.
b. lbs. d. lbs.

237386

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice | Signature: Jan Justice | Month Day Year: 08 04 99

South Carolina Department of Health and Environmental Control

77040 32

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050/0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13500
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

a. PW-01BAB-11102
b.
c.
d.

15. Special Handling Instructions and Additional Information
Trailer #460
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle | Signature: John Eagle | Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237385
a. 43560 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice | Signature: Jan Justice | Month Day Year: 08 04 99

South Carolina Department of Health and Environmental Control

82980

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13501
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

GENERATOR

a. PW-01348-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information
Trailer #401
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: Lillie D. Frierson
Signature: Lillie D. Frierson
Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney
Signature: Hubert Muckelvaney
Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

19. Discrepancy Indication Space
237387
a. 49320 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Tom Justice
Signature: Tom Justice
Month Day Year: 08 04 99

83100 9216 HH14

South Carolina Department of Health and Environmental Control

6.23 (17)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: S C 0 1 7 0 0 2 2 5 6 0
Manifest Document No.: 1 3 5 0 2
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 A.R.

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					1

a. P W - 0 1 B A 8 - 1 1 1 0 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information
Trailer # 310
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (803) 743-9985 A.R.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: Lillie D. Frierson
Signature: Lillie D. Frierson
Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain
Signature: Stanley Garvain
Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

19. Discrepancy Indication Space
237392
a. 51760 lbs. c. lbs.
b. lbs. d. lbs.

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

South Carolina Department of Health and Environmental Control

6:25 (18)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13503
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kl en (Pinewood), Inc.
Rt 1 Box 255
Pinewo d, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

a. P W - 0 1 3 4 3 - 1 1 0 2
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

15. Special Handling Instructions and Additional Information
Trailer #415
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
231393
a. 44769 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson — Signature: Anderson, A. — Month Day Year: 08 05 99

EPA Form 8700 (Rev. 9/88) Previous Editions are Obsolete (DHEC 1988 (Rev. 5/89)) RETAIN THIS COPY FOR YOUR RECORDS

19000 4216HH16

South Carolina Department of Health and Environmental Control

15

6:21

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13304
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Mills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	0008
b.					
c.					
d.					

a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information
Trailer #413
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: Lillie D. Frierson
Signature: Lillie D. Frierson
Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Darr
Signature: Jimmy Darr
Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237391

a. 43240 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson
Signature: David Anderson
Month Day Year: 08 04 99

196040 TCIP#77

South Carolina Department of Health and Environmental Control

6:14

7

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13505

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8101

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-0343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Trailer #373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith | Signature | Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237388

a. 47900 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson | Signature: David Anderson | Month Day Year: 08 05 99

8100 9216 HH 18

South Carolina Department of Health and Environmental Control

6.19 14

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13506

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kl en (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d					

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information
Trailer #460
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle — Signature: John Eagle — Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

screpancy Indication Space
237390

a. 47480 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: R. Dodson — Signature — Month Day Year

78140 9216 HH19

10:21

South Carolina Department of Health and Environmental Control

65

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13507
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
Trailer #331
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston | Signature: Don Houston | Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
2374109
a. 44500 lbs. c. lbs.
b. lbs. d. lbs.

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

South Carolina Department of Health and Environm ntal Control

6:16

(12)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 Manifest Document No. 1 3 3 0 8

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Saf ty-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewo d, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

15. Special Handling Instructions and Additional Information
Trailer #401

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: Lillie D. Friesa | Signature: Lillie D. Friesa | Month Day Year: 08 04 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hubert Mckelvaney | Signature: Hubert Mckelvaney | Month Day Year: 08 04 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237389

a. 51000 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: D. Anderson | Signature: David Anderson | Month Day Year: 08 05 99

9217HH01

South Carolina Department of Health and Environmental Control

29

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13509
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (1 ad)	0 0 1	D T	3 0	Y	0 0 0 8
b.					
c.					

a. P W - 0 1 3 4 3 - 1 1 0 2
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

15. Special Handling Instructions and Additional Information
TRAILER # 444

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 0 8 Day 0 5 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DON HOUSTON — Signature: Don Houston — Month 0 8 Day 0 5 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237394

a. 41580 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

10:13 (30) 9217HHQ2

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 5 0 — Manifest Document No. 1 3 5 1 0
2. Page 1 of 1

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GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Mills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information TRAILER # 460

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 0 8 0 5 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle — Signature: [signature] — Month Day Year: 0 8 0 5 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237395

a. 42360 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson — Signature: David Anderson — Month Day Year

South Carolina Departm nt of H alth and Environm ntal Control

11:24 (40)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 351 1

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 562-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON SITE INSPECTOR
SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 373

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month Day Year
RICHARD G. NIELSON	[signature]	08 05 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
Jerry Smith	[signature]	08 05 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

19. Discrepancy Indication Space
237400

a. 49780 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month Day Year
A. Anderson	[signature]	08 05 99

South Carolina Departm nt of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 / Manifest Document No. 3 5 1 2

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

a. P W - 0 1 3 4 3 - 1 1 0 2
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

15. Special Handling Instructions and Additional Information TRAILER # 415

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G NIELSON | Signature: [signature] | Month Day Year: 0 8 0 5 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ~~RICH~~ DAVID WINTER | Signature: [signature] | Month Day Year: 0 8 0 5 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year: ~~08 05 99~~

FACILITY

Discrepancy Indication Space
237399

a. 43500 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

South Carolina Departm nt of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13513
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name:
8. U.S. EPA ID Number:

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	008
b.					
c.					
d.					

a. PW-01343-1102
b. -
c. -
d. -

15. Special Handling Instructions and Additional Information TRAILER # 401

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Richard G Nielson | Signature: [signature] | Month Day Year: 08 05 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney | Signature: Hubert Muckelvaney | Month Day Year: 08 05 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: | Signature: | Month Day Year:

FACILITY

Discrepancy Indication Space: 237398

a. 44780 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D Anderson | Signature: David Anderson | Month Day Year: 08 05 99

South Carolina Departm nt of H alth and Environmental Control

1051 (37)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13514
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Klean (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (1 ad)	001	DT	30	Y	D008
b.					
c.					
d.					

a. PW-01343-1102
b. -
c. -
d. -

15. Special Handling Instructions and Additional Information
TRAICOR # 310

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Richard G Nielson | Signature: [signature] | Month Day Year: 080599

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain | Signature: Stanley Garvain | Month Day Year: 080599

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237397

a. 49580 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson | Signature: David A. Anderson | Month Day Year: 080599

11440

921714407

South Carolina Departm nt of Health and Environm ntal Control

11:26 41

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC D 1 7 0 0 2 2 5 6 0 1 — Manifest Document No. 3 5 1 5
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Hills Trucking, Inc.
6. U.S. EPA ID Number: D H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 803 [illegible]
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d					

J. Additional Descriptions for Materials Listed Above
a. PW - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 413

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name	Signature	Month Day Year
[illegible]	[illegible]	08 05 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
Jimmy Dorr	[illegible]	10 8 0 5 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

FACILITY

iscrepancy Indication Space
237401

a. 41840 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month Day Year
[illegible]	[illegible]	

9217HH04

South Carolina Departm nt of Health and Environmental Control

80420

45

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 Manifest Document No. 13517
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9
7. Transporter 2 Company Name
8. U.S. EPA ID Number
9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONM.

15. Special Handling Instructions and Additional Information TRAILER # 444

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month Day Year: 08 05 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston | Signature: Don Houston | Month Day Year: 08 05 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237402

a. 45400 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] | Signature: [illegible] | Month Day Year: 08 05 99

83880

9217HH10

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

10:48

17

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 35118
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kl en (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 460

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16 **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G. NIELSON Signature: [signature] Month Day Year: 08 05 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle Signature: [signature] Month Day Year: 08 05 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name Signature Month Day Year

Discrepancy Indication Space
237407
a. 50120 lbs. c. lbs.
b. lbs. d. lbs.

FACILITY

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name Signature Month

87180 9217HH11

South Carolina Department of Health and Environmental Control

(12)

6:15

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13519
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-9181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (1 ad)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 401
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 08 05 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney — Signature: Hubert Muckelvaney — Month Day Year: 08 05 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237405

a. 53460 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature

82760

9217HH12

South Carolina Department of Health and Environmental Control

6:21

15

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 2 0

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter 1 Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

TRAILER # 310

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GARY L. CRAWFORD — Signature: Gary L Crawford — Month Day Year: 08 05 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 08 05 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space

237406

a. 51300 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

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

GENERATOR

TRANSPORTER

FACILITY

1 M40 9217 HH13

South Carolina Department of Health and Environmental Control

6.13 (3)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 3 5 2 1

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 373
WO# ___
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: G.L. CRAWFORD | Signature: [signature] | Month Day Year: 08 05 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith | Signature: [signature] | Month Day Year: 08 05 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

Discrepancy Indication Space
237403

a. 46280 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

76900 9217HH14

South Carolina Department of Health and Environm ntal Control

6.18 (14)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 2 2
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER# 413
WO# ___
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: G. L CRAWFORD — Signature: [signature] — Month Day Year: 0 8 0 5 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr — Signature: [signature] — Month Day Year: 0 8 0 5 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237404

a. 41600 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature

13940 9218HH01

South Carolina Department of Health and Environmental Control

8:35 20

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13523
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Saf ty-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

STATE INSPECTOR DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 415

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: BILL LACHICOTTE
Signature: Bill Lachicotte III
Month Day Year: 08 06 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER
Signature: David Winter
Month Day Year: 08 06 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237408

a. 38820 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

South Carolina Departm nt of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 2 4

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-6181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 310

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: BILL LACHICOTTE — Signature: Bill Lachicotte — Month Day Year: 0 8 0 6 9 9

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 0 8 0 6 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237410

a. 50900 lbs. c. ____ lbs.
b. ____ lbs. d. ____ lbs.

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

Printed/Typed Name — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

F1340 9218 HH03

South Carolina Department of Health and Environm ntal Control

10:59

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 2 5
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

SITE INSPECTOR DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 373

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: BILL LACHICOTTE — Signature: Bill Lachicotte — Month Day Year: 08 06 99

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: Jerry Smith — Month Day Year: 08 06 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

TRANSPORTER

Discrepancy Indication Space
237411

a. 45840 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

FACILITY

8U08U 9218 HH 04

South Carolina Department of Health and Environmental Control

30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

11:02

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 1 — Manifest Document No. 3 5 2 6
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 413

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Bill Lachicotte — Signature: Bill Lachicotte — Month 0 8 Day 0 6 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Durr — Signature: [signature] — Month 0 8 Day 0 6 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237412

a. 45060 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

160 100 9218HH05

South Carolina D partment of Health and Environm ntal Control

32

11:07

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 2 7
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9
7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kl en (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	G. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

SITE INSPECTOR S.C. DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 401

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average, 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: BILL LACHICOTTE — Signature: Bill Lachicotte — Month Day Year: 0 8 0 6 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert McKelvaney — Signature: Hubert McKelvaney — Month Day Year: 0 8 0 6 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237413

a. 43120 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

7210 HH06

South Carolina Department of Health and Environmental Control

824460 33

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 0 1 7 0 0 2 2 5 5 0 — Manifest Document No. 1 3 5 2 8

2. Page 1 of 1

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

A. State Manifest Document Number

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone (803) 452-5003

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name:
8. U.S. EPA ID Number:

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR DEPARTMENT OF HEALTH

15. Special Handling Instructions and Additional Information TRAILER # 460

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
~~(843) 743-9985~~

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: BILL LACHICOTTE — Signature: Bill Lachicotte — Month 0 8 Day 0 6 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle — Signature: [signature] — Month 0 8 Day 0 6 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year

FACILITY

Discrepancy Indication Space
23744

a. 48880 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice — Signature: [signature] — Month Day Year

South Carolina Department of Health and Environmental Control

4218HH04

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

17620 36

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 3 0
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information: TRAILER # 415

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: BILL LACHICOTTE — Signature: Bill Lachicotte — Month Day Year: 08 06 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month Day Year: 08 06 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space: 23745

a. 42580 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: Jan Justice — Signature: Jan Justice — Month Day Year: 08 06 99

7218 HHUD

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 3 5 3 1

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	0 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

WASTE INSPECTOR SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 403

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington D.C. 20503

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Printed/Typed Name: Bill LACHICOTTE — Signature: Bill Lachicotte — Month Day Year: 0 8 0 6 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert W Smith Jr — Signature: [signature] — Month Day Year: 8 6 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
a. 42400 lbs. c. lbs.
b. lbs. d. lbs.
23746

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice — Signature: Jan Justice — Month Day Year

9218HH10

South Carolina Department of Health and Environm ntal Control

(18)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 Manifest Document No. 3332

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone 800-422-8181

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER# 310

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L. CRAWFORD
Signature: Gary L Crawford
Month Day Year: 08 06 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garrain
Signature: Stanley Garrain
Month Day Year: 08 06 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

19. Discrepancy Indication Space
23423

a. 48700 lbs. c. lbs.
b. lbs. d. lbs.

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

GENERATOR

TRANSPORTER

FACILITY

18480

9218HH11

South Carolina Department of Health and Environm ntal Control

20

5.55

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 3 3

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone 800-[illegible]

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone
(803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER# 331
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average [illegible] and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. [illegible] burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Gary L Crawford — Signature: [signature] — Month 0 8 Day 0 6 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston — Signature: Don Houston — Month 0 8 Day 0 6 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237424

a. 45780 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9218 HH 12

South Carolina Department of Health and Environmental Control

(12)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13534

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
OHD068913409

C. State Transporter's ID

D. Transporter's Phone 800-423-8[illegible]

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
SCD070375985

G. State Facility's ID

H. Facility's Phone
(803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 4160

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name	Signature	Month Day Year
GARY L. CRAWFORD	Gary L Crawford	08 06 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
John Eargle	John Eagle	08 06 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

Discrepancy Indication Space
237420

a. 51520 lbs. c. lbs
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month Day Year

GENERATOR

TRANSPORTER

FACILITY

9218HH13

South Carolina Department of Health and Environmental Control

(15)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 3535

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-6003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 401
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., SW, Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month Day Year: 08 06 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hibert McKelvaney — Signature: Hibert McKelvaney — Month Day Year: 08 06 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237421

a. 48680 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

93140 9218HH14

South Carolina Department of Health and Environmental Control

75420 (5)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13536

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-823-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	0 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 0 1 3 4 3 - 1 1 0 2
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 373
WO# ___
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD — Signature: [signature] — Month Day Year: 08 06 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jerry Smith — Signature: [signature] — Month Day Year: 08 06 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237418

a. 43740 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

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

Printed/Typed Name — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

9218HH15

South Carolina D partment of Health and Environm ntal Control

(17)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 017002256 0 — Manifest Document No. 13537
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 413
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503

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Printed/Typed Name: Gary L Crawford — Signature: Gary L Crawford — Month Day Year: 08 06 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr — Signature: Jimmy Dorr — Month Day Year: 08 06 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237422
a. 40380 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name — Signature — Month Day Year

9218HH16

South Carolina Department of Health and Environmental Control

9

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13538

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone: 800-42[illegible]
State Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 415
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month Day Year: 08 06 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month Day Year: 08 06 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
23719
a. 41580 lbs. c. lbs
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature

9218HH17

South Carolina Department of Health and Environmental Control

21

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 3 9

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

TRAILER # 403

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L. CRAWFORD — Signature: Gary L Crawford — Month 0 8 Day 0 6 Year 9 9

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Robert W. Smith Jr. — Signature: Robert W Smith Jr — Month 0 8 Day 0 6 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237425

a. 47480 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

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

Printed/Typed Name — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

9219 HH01

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 35541

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01343 - 1102
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 415

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing the burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment, OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 08 07 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month Day Year: 08 07 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
2374126

a. 40120 lbs. c. _____ lbs
b. _____ lbs. d _____ lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name — Signature — Month Day Year

82340 9219 HH02

South Carolina Department of Health and Environmental Control

26

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 4 2
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

[redacted]

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	[redacted]
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

[redacted]

15. Special Handling Instructions and Additional Information TRAILER # 310

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for [redacted] minutes for transporters, and 10 [redacted] treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the [redacted] the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 0 8 0 7 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 0 8 0 7 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237427

a. 51240 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

18180

9219HH03

South Carolina Department of Health and Environmental Control

30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 3543

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone: 800-423-[illegible]
Transporter's ID
Transporter's Phone
Facility's ID
Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-013413-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER #413

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reading the instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing the burden to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month 08 Day 07 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jimmy Dorr | Signature: [signature] | Month 08 Day 07 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237430

a. 42560 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

18180

9219HH04

South Carolina Department of Health and Environmental Control

29

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 4 4

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

[redacted]

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	[redacted]
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

[redacted]

15. Special Handling Instructions and Additional Information TRAILER # 373

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name [redacted] are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international [redacted] government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
RICHARD G. NIELSON	[signature]	0 8	0 7	9 9

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jerry Smith	[signature]	0 8	0 7	9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

iscrepancy Indication Space

237429

a. 47290 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]			

GENERATOR

TRANSPORTER

80000 9219HH05

South Carolina Department of Health and Environmental Control

32

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13545

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 401

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to [illegible] minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reading the instructions, gathering data, and completing and reviewing the collection of information. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name	Signature	Month Day Year
RICHARD G NIELSON	[signature]	08 07 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
Hubert Muckelvaney	Hubert Muckelvaney	08 07 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

Discrepancy Indication Space
237431

a. 46740 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month Day Year

GENERATOR

TRANSPORTER

FACILITY

9219HH06

South Carolina D partment of Health and Environmental Control

27

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 4 6

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 460

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, DC 20460 and to Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina

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Printed/Typed Name	Signature	Month	Day	Year
RICHARD G. NIELSON	[signature]	0 8	0 7	9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
DON HOUSTON	Don Houston	0 8	0 7	9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

Discrepancy Indication Space
237428

a. 41480 lbs. c. _____ lbs.
b. _____ lbs. d. _____ lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]			

7214HH07

South Carolina D partment of Health and Environmental Control

33

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1354 7

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8101
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER #331

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name	Signature	Month	Day	Year
RICHARD G. NIELSON	[signature]	08	07	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
John Fargle	[signature]	08	07	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

. Discrepancy Indication Space
237432

a. 50760 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
D. Anderson	[signature]	08	07	99

80880 9219HH08

South Carolina Department of Health and Environmental Control

34

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13548
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

Transporter's ID

Transporter's Phone 800-423-8

7. Transporter 2 Company Name
8. U.S. EPA ID Number

Transporter's ID

Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

Facility's ID

Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	0008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 403

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average .37 minutes for generators, 45 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, DC 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
RICHARD G. NIELSON	[signature]	08	07	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Robert W Smith Jr	[signature]	8	7	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

Discrepancy Indication Space
2374133

a. 47120 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR

TRANSPORTER

FACILITY

P120 9219HH09

South Carolina Department of Health and Environmental Control

(12)

6.23

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13549
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 415

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G. NIELSON Signature: [signature] Month Day Year: 08 07 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER Signature: [signature] Month Day Year: 08 07 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name Signature Month Day Year

Discrepancy Indication Space
237438
a. 43540 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name Signature Month Day Year

79040 9219HH10

South Carolina Department of Health and Environmental Control

6:17 (8)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 / Manifest Document No. 3550
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-[illegible]

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01343 - 1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER #310

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name, and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G. NIELSON
Signature: [signature]
Month Day Year: 08 07 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain
Signature: Stanley Garvain
Month Day Year: 08 07 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

19. Discrepancy Indication Space
237436

a. 47820 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

10 140

9219HH#1

South Carolina Department of Health and Environmental Control

6

6:10

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 135551

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
OHD068913409

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
SCD070375985

G. State Facility's ID

H. Facility's Phone
(803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01343 - 1102
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 373

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., [illegible] Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month 08 Day 07 Year 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jerry Smith | Signature: [signature] | Month 08 Day 07 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

Discrepancy Indication Space
237434

a. 45540 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

GENERATOR

TRANSPORTER

FACILITY

80320 9219HH12

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

6.20 9

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 3552

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-0134-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 413

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 30 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing [redacted], and completing and reviewing the form. [redacted] the burden estimate, including suggestions for [redacted] Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. [redacted] Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16 **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G NIELSON — Signature: [signature] — Month Day Year: 08 07 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jimmy Derr — Signature: [signature] — Month Day Year: 08 07 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
237437

a. 44960 lbs. c. lbs
b. lbs. d. lbs.

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

GENERATOR — TRANSPORTER — FACILITY

13360 9219HH13

South Carolina Department of Health and Environmental Control

9:24 (16)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 Manifest Document No. 3553
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ONSITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER #331

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month Day Year: 08 07 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle | Signature: [signature] | Month Day Year: 08 07 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237439

a. 40960 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

81480

9219HH14

South Carolina Department of Health and Environmental Control

6:13

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC0170022561 Manifest Document No. 13554

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (1 ad)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 401

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month 08 Day 07 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Mckelvaney | Signature: Hubert Mckelvaney | Month 08 Day 07 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237435

a. 47720 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

75140

9221HH02

South Carolina Department of Health and Environmental Control

10:26

20

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 35556

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone 800-[illegible]

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone 803-452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2

b. - -

c. - -

d. - -

K. Handling Codes for Wastes Listed Above

OFFICIAL INSPECTOR
S.C. DEPT. OF HEALTH
AND ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER #415

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 08 09 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month Day Year: 08 09 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
237440

a. 39720 lbs. c. lbs.

b. lbs. d. lbs.

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

80160 922144403

South Carolina Department of Health and Environmental Control

10:44 25

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 35557
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

G. State Transporter's ID
H. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

I. State Transporter's ID
J. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

K. State Facility's ID
L. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 310

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 30 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
RICHARD G. NIELSON	Richard G. Nielson	08	09	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Stanley Garrain	Stanley Garrain	08	09	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

Discrepancy Indication Space
237441

a. 49780 lbs. c. _____ lbs.
b. _____ lbs. d. _____ lbs.

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

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR — TRANSPORTER — FACILITY

South Carolina D partm nt of Health and Environmental Control

10:48 (26)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 5 8

2. Page 1 of 1

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

Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ONSITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information

TRAILER # 413

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 0 8 0 9 9 9

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jimmy Darr — Signature: [signature] — Month Day Year: 0 8 0 9 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

237442

a. 41980 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: April Anderson — Signature: [signature] — Month Day Year: 0 8 0 9 9 9

FACILITY

South Carolina D partment of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 135559
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name:
8. U.S. EPA ID Number:

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTION SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 401

WO # _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 32 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 0 8 0 9 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert McKelvaney — Signature: [signature] — Month Day Year: 0 8 0 9 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237443

a. 41540 lbs. c. lbs.
b. lbs d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson — Signature: [signature] — Month Day Year

9221HH06

South Carolina Department of Health and Environmental Control

75000 30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13560

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER #373

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 08 09 99

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jerry Smith — Signature: [signature] — Month Day Year: 08 09 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

a. 43960 lbs. c. _____ lbs.
b. _____ lbs. d. _____ lbs.

237444

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

Printed/Typed Name — Signature — Month Day Year

FACILITY

South Carolina Departm nt of H alth and Environmental Control

80740 32

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: S C 0 1 7 0 0 2 2 5 6 0
Manifest Document No.: 3 5 6 1
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

	11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a.	RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above
DIVISION OF HEALTH
DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 331

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON
Signature: Richard G. Nielson
Month Day Year: 0 8 0 9 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Fergle
Signature: John Fergle
Month Day Year: 0 8 0 9 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237445

a. 48500 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: (Jim Justice)
Signature
Month Day Year: 0 8 0 9 9 9

14000

9221HH08

South Carolina Department of Health and Environmental Control

(T)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13862
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER# 415
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

ON-SITE INSPECTOR

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: GARY L. CRAWFORD | Signature: Gary L Crawford | Month Day Year: 08 09 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month Day Year: 080999

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237447

a. 42980 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13564
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-0141
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH

15. Special Handling Instructions and Additional Information
TRAILER # 413
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GARY L. CRAWFORD — Signature: Gary L Crawford — Month Day Year: 08 09 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Darr — Signature: Jimmy Darr — Month Day Year: 08 09 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237450

a. 42100 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson — Signature: D. Anderson — Month Day Year: 08 10 99

83440

9221HH10

South Carolina Department of Health and Environmental Control

6:26

(12)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 135565

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
Transporter's ID
Transporter's Phone: 800-423-8151
Transporter's ID
Transporter's Phone
Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER# 310
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 32 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name	Signature	Month	Day	Year
Gary L Crawford	Gary L Crawford	08	09	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Stanley Garvain	Stanley Garvain	08	09	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space
237451

a. 52180 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR — TRANSPORTER — FACILITY

8104C

9221HH11

South Carolina Department of Health and Environmental Control

6:20

9

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13566

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8191
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH

15. Special Handling Instructions and Additional Information
TRAILER # 401
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 97 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month Day Year: 08 09 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hubert Muckelvaney — Signature: Hubert Muckelvaney — Month Day Year: 08 09 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237449

a. 47760 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name — Signature — Month Day Year

18580

9221HH12

South Carolina Department of Health and Environmental Control

6:13

5

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 017002256 Manifest Document No. 135617

2. Page 1 of 1

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

State Manifest Document Number

State Generator's ID

State Transporter's ID

Transporter's Phone (800) 423-8181

State Transporter's ID

Transporter's Phone

State Facility ID

Facility Phone (803) 452-5003

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW - 01343 - 11102

b. - -

c. - -

d. - -

K. Handling Codes for Wastes Listed Above

OFFICIAL USE ONLY
SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information

TRAILER# 373

WO # _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: GARY L CRAWFORD | Signature: [signature] | Month 08 Day 09 Year 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jerry Smith | Signature: [signature] | Month 08 Day 09 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

237446

a. 46980 lbs. c. lbs.

b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

GENERATOR

TRANSPORTER

FACILITY

0-1 180

9221HH13

South Carolina Department of Health and Environmental Control

(8)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

6-18

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13568
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD007037598 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 331
WO# _____
24 hour mergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 08 Day 09 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Egrgle | Signature | Month 08 Day 09 Year 98

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237448

a. 57360 lbs. c. ____ lbs.
b. ____ lbs. d. ____ lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

75660 9222 HHO

South Carolina D partm nt of Health and Environmental Control

9:00 (24)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 6 9
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name:
8. U.S. EPA ID Number:

9. Designated Facility Name and Site Address
Saf ty-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone: 800-423-8181
State Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information: TRAILER #445

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 33 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name	Signature	Month	Day	Year
RICHARD G. NIELSON	Richard G. Nielson	0 8	1 0	9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
HAROLD JACKSON	Harold Jackson	0 8	1 0	9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space
237452

a. 39960 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year

13000

92224402

South Carolina Department of Health and Environmental Control

10:16

89

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No.: 1 3 5 7 2

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-723-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 415

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name | Signature | Month Day Year

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RICHARD G. NIELSON | Signature: Richard G. Nielson | Month Day Year: 08 10 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month Day Year: 08 10 99

TRANSPORTER

19. Discrepancy Indication Space
237453

a. 37220 lbs. c. lbs.
b. lbs. d. lbs.

FACILITY

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

00540

92224403

South Carolina Department of Health and Environmental Control

30

10:21

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 35773
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kl en (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD073759815

State Manifest Document Number
State Generator's ID
Transporter's ID
Transporter's Phone: 800-423-8161
State Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01343 - 1102
b.
c.
d.

Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 331
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 08 10 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle — Signature: [signature] — Month Day Year: 08 10 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237454

a. 48000 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

80540

9222HH04

South Carolina Department of Health and Environmental Control

(32)

10:48

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13574

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 310

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 08 10 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 08 10 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237455

a. 49400 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

81060 9222HH05

South Carolina D partment of H alth and Environmental Control

36

11:10

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 7 5

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. State Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ONSITE INSPECTION
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRACON # 401

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 08 10 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hubert Muckelvaney — Signature: Hubert Muckelvaney — Month Day Year: 08 10 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
237456

a. 479100 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name — Signature — Month Day Year

78500

4222HH06

South Carolina Departm nt of Health and Environmental Control

11:14

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13576

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone: 800-423-8165
State Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-11102
b.
c.
d.

Handling Codes for Wastes Listed Above
ON-SITE INSPECTION
S.C. DEPT. OF HEALTH AND ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 373

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 08 10 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: [signature] — Month Day Year: 08 10 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
23457

a. 47000 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

M100 9222HH07

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

11:16

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13577
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

Transporter's ID

Transporter's Phone: 800-42[illegible]

7. Transporter 2 Company Name
8. U.S. EPA ID Number

Transporter's ID

Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

Facility's ID

Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 413

WO# _____

24 hour em rgency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 0 8 1 0 9 9

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jimmy Dorr — Signature: [signature] — Month Day Year: 0 8 1 0 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

screpancy Indication Space
237458

a. _____ lbs. c. _____ lbs.
b. _____ lbs. d. _____ lbs.

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

Printed/Typed Name — Signature — Month Day Year

9222HH09

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13579
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-2181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (1 ad)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 445
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L. CRAWFORD | Signature | Month 08 Day 10 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HAROLD JACKSON | Signature | Month 08 Day 10 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237459
a. 43020 lbs. c. lbs
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9222HH10

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

79900 48

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13580
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kl en (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #331
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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GENERATOR

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Printed/Typed Name: Gary Crawford | Signature: [signature] | Month 08 Day 10 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle | Signature: [signature] | Month 08 Day 10 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237460
a. 47680 lbs. c. lbs
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

South Carolina Department of Health and Environmental Control

7:48 (13)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13581
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER 415
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GARY CRAWFORD — Signature: Gary L Crawford — Month Day Year: 08 10 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month Day Year: 08 10 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237465

a. 41820 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson — Signature: David Anderson — Month Day Year: 08 11 99

9222 HHIC

South Carolina D partment of Health and Environm ntal Control

80400 51

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 5 8 2

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #310
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Gary L. Crawford — Signature: Gary L. Crawford — Month 08 Day 10 Year 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month 08 Day 10 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237461

a. 49380 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: M. Justice — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

South Carolina Department of Health and Environmental Control

81900

52

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 Manifest Document No. 13583

2. Page 1 of 1

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

Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (1 ad)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 401

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: Gary L Crawford | Signature: Gary L Crawford | Month 08 Day 10 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hubert McKelvaney | Signature: Hubert McKelvaney | Month 08 Day 10 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237462

a. 48940 lbs. c. lbs.
b. lbs. d lbs.

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

Printed/Typed Name: Dan Justice | Signature: Dan Justice | Month 08 Day 10 Year 99

South Carolina Department of Health and Environmental Control

79380 53

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13584
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-6181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. State Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR, S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER#373

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

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Printed/Typed Name	Signature	Month	Day	Year
GARY L CRAWFORD	[signature]	08	10	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[signature]	[signature]	08	10	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

. Discrepancy Indication Space
232463

a. 48060 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]	08	10	99

South Carolina Departm nt of Health and Environmental Control

77460 54

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC0 1 7 0 0 2 2 5 6 0 Manifest Document No. 1 3 5 8 5
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # ~~[illegible]~~ 413
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: Gary L Crawford | Signature: [signature] | Month Day Year: 08 10 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Darr | Signature: [signature] | Month Day Year: 08 10 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237464
a. 42080 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] | Signature: [signature] | Month Day Year: 08 10 99

South Carolina Department of Health and Environmental Control

7:58 (16)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No.: 13586
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9
7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. -
c. -
d. -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Trailer #331
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. SW, Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 08 1 1 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle — Signature: John Eargle — Month Day Year: 08 1 1 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
2374660
a. 476600 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson — Signature: David Anderson — Month Day Year: 08 11 99

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13587
2. Page 1 of 1

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3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Trailer #310
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: Lillie D. Fnersen | Signature: Lillie D. Fnersen | Month 08 Day 11 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain | Signature: Stanley Garvain | Month 08 Day 11 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
23467
a. 49760 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: G. Anderson | Signature: [illegible] | Month 08 Day 11 Year 99

81000

831

South Carolina Departm nt of Health and Environmental Control

(21)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13588

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-42[illegible]

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

DELIVERY ACCEPTED
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
Trailer #401
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: Lillie D. Emerson | Signature: Lillie D. Emerson | Month Day Year: 08 11 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hubert Merkelvaney | Signature: Hubert Merkelvaney | Month Day Year: 08 11 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237468

a. 47380 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

South Carolina Department of Health and Environmental Control

837

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13589
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
Trailer #413
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: Lillie D. Friersa | Signature: Lillie D. Friersa | Month Day Year: 08 11 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr | Signature: Jimmy Dorr | Month Day Year: 08 11 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237470
a. 44700 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] | Signature | Month Day Year

7800 835 624

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13590
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
Trailer #373
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name	Signature	Month	Day	Year
Lillie D. Frierson	Lillie D. Frierson	08	11	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Jerry Smith	Jerry Smith	08	11	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

Discrepancy Indication Space
237469
a. 46980 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]	08	29	99

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13591
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

E. Transporter's Phone: 800-[illegible]

7. Transporter 2 Company Name
8. U.S. EPA ID Number

G. Transporter's ID

H. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

I. Facility's ID

J. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	K. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

[illegible] INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
Trailer #445
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 08 11 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Harold Jackson — Signature: Harold Jackson — Month Day Year: 08 11 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
23747
a. 43600 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] — Signature — Month Day Year: 08 12 99

GENERATOR — TRANSPORTER — FACILITY

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13593
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

State Manifest Document Number

State Generator's ID

State Transporter's ID

State Transporter's Phone 800-423-8161

State Transporter's ID

State Transporter's Phone

State Facility's ID

State Facility's Phone 803 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 B 4 8 - 1 1 0 2
b.
c.
d.

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Trailer # 331
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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GENERATOR

Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 08 11 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eggle — Signature: John Eggle — Month Day Year: 08 11 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
23473

a. 49,800 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

81780 9223HH09

South Carolina Departm nt of Health and Environmental Control

12:30 (30)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13594
2. Page 1 of 1

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3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

State Manifest Document Number
State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

State Transporter's ID
Transporter's Phone: 723-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

State Transporter's ID
Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

State Facility's ID
Facility's Phone: 803-[illegible]-9003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Code
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Trailer #415
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 08 11 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month Day Year: 08 11 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
23742
a. 46280 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

4223H#10

South Carolina Department of Health and Environmental Control

81200 36

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 — Manifest Document No. 13595
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above — K. Handling Codes for Wastes Listed Above

a. PW-01BAB-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information

Trailer #310

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 08 11 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 08 11 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237476

a. 50140 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

9223HH11

78000 35

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 135996
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 8 - 1 1 0 2
b.
c.
d.

15. Special Handling Instructions and Additional Information
Trailer #413
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: Lillie D. Frierson — Signature: Lillie D. Frierson — Month Day Year: 08 1 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr — Signature: Jimmy Dorr — Month Day Year: 08 1 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
237475
a. 42940 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

76800

9223HH12

South Carolina Department of Health and Environmental Control

12:59

34

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13597
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BA3-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
Trailer #373
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Lillie D. Emerson | Signature | Month Day Year: 08 11 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith | Signature | Month Day Year: 08 11 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237474
a. 45840 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9223 HHIB

South Carolina Department of Health and Environmental Control

7760 38

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13548
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01348-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
Trailer #401
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

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Printed/Typed Name: Lillie D. Frierson
Signature: Lillie D. Frierson
Month 08 Day 11 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert McKelvaney
Signature: Hubert McKelvaney
Month 08 Day 11 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237477

a. 44120 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

4223HH14

South Carolina Department of Health and Environm ntal Control

80240 44

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13599

2. Page 1 of 1

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3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b. -
c. -
d. -

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
DEPT OF HEALTH

15. Special Handling Instructions and Additional Information

Trailer #445

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average [illegible] hours per generator, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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GENERATOR

Printed/Typed Name: Lillie D. Frierson | Signature: Lillie D. Frierson | Month Day Year: 08 11 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: HAROLD JACKSON | Signature: Harold Jackson | Month Day Year: 08 11 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

Discrepancy Indication Space

237478

a. 45200 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

FACILITY

10400 7223 HH15

South Carolina Department of Health and Environmental Control

6:26 (18)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13600
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name:
8. U.S. EPA ID Number:

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BAB-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER 415
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

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Printed/Typed Name: BILL LACHICOTTE Signature: Bill Lachicotte Month Day Year: 08 11 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER Signature: David Winter Month Day Year: 08 11 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Signature: Month Day Year:

FACILITY

Discrepancy Indication Space
237484
a. 42220 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson Signature: David Anderson Month Day Year: 08 13 99

14600

South Carolina Department of Health and Environmental Control

6:14 (8)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

1223HH16

PLEASE PRINT or TYPE (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 0 1

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above — Handling Codes for Wastes Listed Above

a. P W - 0 1 B 4 B - 1 1 0 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information TRAILER 331

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month 0 8 Day 1 1 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle — Signature: [signature] — Month 08 Day 11 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
237480

a. 47060 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

9223 HH17

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

6:11

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 13602
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone ( ) PL 843 ~~803~~ 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y
b.				
c.				
d.				

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER 373

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
PL 843 ~~803~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. (This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing the burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: W F LACHICOTTE III — Signature: W F Lachicotte III — Month Day Year: 08 11 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: Jerry Smith — Month Day Year: 08 11 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237479

a. 47100 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

(13)

6-23

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 0 3
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-42

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER 413

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, DC 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 08 11 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr — Signature: [signature] — Month Day Year: 08 11 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237483

a. 414020 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson — Signature: David Anderson — Month Day Year: 08 12 99

South Carolina Department of Health and Environmental Control

6:20 (12)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13604

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone: BL 843 ~~803~~) 743-9985 L.G.

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. PW - 01348 - 11102

b. - -

c. - -

d. - -

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER 310

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford BL 843 ~~(803)~~ 743-9985 L.G.

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing the burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: W F LACHICOTTE III | Signature: W F Lachicotte III | Month 08 Day 11 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stanley Garvain | Signature: Stanley Garvain | Month 08 Day 11 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

Discrepancy Indication Space 237482

a. 49540 lbs. c. lbs.

b. lbs. d. lbs.

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

Printed/Typed Name: D. Anderson | Signature: David Anderson | Month 08 Day 12 Year 99

8 6580 9223HH20

South Carolina Department of Health and Environmental Control

6:17

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

IIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 0 5

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

15. Special Handling Instructions and Additional Information
TRAILER 401
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: WF LACHICOTTE IV — Signature: WF Lachicotte IV — Month Day Year: 0 8 1 1 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Meekeyaney — Signature: Hubert Meekeyaney — Month Day Year: 0 8 1 1 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237481
a. 53160 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

H460

9224HH01

South Carolina Department of Health and Environmental Control

30

8:34

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 0 6
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name:
8. U.S. EPA ID Number:

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ON SITE INSPECTION
DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information

Trailer #445

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: Lillie D. Friersen — Signature: Lillie D. Friersen — Month Day Year: 0 8 1 2 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: HAROLD JACKSON — Signature: Harold Jackson — Month Day Year: 0 8 1 2 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: — Signature: — Month Day Year:

FACILITY

Discrepancy Indication Space

237485

a. 44660 lbs. c. _____ lbs.
b. _____ lbs. d. _____ lbs

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

Printed/Typed Name: [illegible] — Signature: [illegible] — Month Day Year: [illegible]

80000 9224 HH02

South Carolina Department of Health and Environm ntal Control

36

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

'NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 0 7

2. Page 1 of 1

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GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Saf ty-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

Facility's Phone: 803-452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above — Handling Codes for Wastes Listed Above

a. P W - 0 1 B 4 B - 1 1 0 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information TRAILER 3381 BL SE

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford BL 843 ~~803~~ 743-9985

ON-SITE REPRESENTATIVE

Public reporting burden for this collection of information is estimated to average 67 minutes for generators, 15 minutes for transporters, and 10 minutes for owners/operators of TSD facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month 0 8 Day 1 2 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: John Eagle — Signature: John Eagle — Month 0 8 Day 1 2 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space: 2374486

a. 47640 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13608
2. Page 1 of 1

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3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) ~~803~~) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Code
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BAB-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER # 373

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
843 (~~803~~) 743-9985

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Printed/Typed Name: WF LACHICOTTE III
Signature: WF Lachicotte III
Month Day Year: 08 12 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith
Signature: Jerry Smith
Month Day Year: 08 12 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
a. 45800 lbs. c. lbs.
b. lbs. d. lbs.

237487

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: M Anderson
Signature: David Anderson
Month Day Year: 08 12 99

78900

9224HH04

South Carolina D partment of Health and Environmental Control

10:44

38

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13609

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (BL 843 ~~803~~) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Code
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW-01848-1102
b.
c.
d.

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER #413

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
BL 843 (~~803~~) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 08 12 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Darr — Signature: [signature] — Month Day Year: 08 12 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237488

a. 43240 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

18540 9224HH05

South Carolina Department of Health and Environmental Control

(41)

10:51

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 1 0

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone HMBL 843 ~~803~~) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name:

8. U.S. EPA ID Number:

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

Shipping Manifest Document Number
Generator's ID
Transporter's ID
Transporter's Phone 800-423-8101
Transporter's ID
Transporter's Phone
Facility's ID
Facility's Phone (803) 462-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 B 4 8 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTION
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 401
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
HMBL 843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III
Signature: WF Lachicotte III
Month Day Year: 0 8 1 2 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Mckelvaney
Signature: Hubert Mckelvaney
Month Day Year: 0 8 1 2 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

FACILITY

Discrepancy Indication Space
237489
a. 45320 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D Anderson
Signature: David Anderson
Month Day Year: 08 12 99

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 1 1
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (~~803~~ 843) 743-9985

State Manifest Document Number
State Generator's ID
State Transporter's ID
State Transporter's Phone (800-423-8151)
State Transporter's ID
State Transporter's Phone
State Facility's ID
State Facility's Phone (803) 562-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9
7. Transporter 2 Company Name
8. U.S. EPA ID Number
9. Designated Facility Name and Site Address: Safety-Kleen (Pinewood), Inc., Rt 1 Box 255, Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 B 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

J. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information: TRAILER # 310

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 08 12 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 08 12 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space: 237491

a. 47640 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: E Anderson — Signature: David Anderson — Month Day Year: 08 12 99

16400 ~~26400~~ 9224 ~~111~~ 077

South Carolina Department of Health and Environmental Control

10:56 43

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 1 2
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843 ~~803~~) 743-9985 BL

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	0 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01 B A 8 - 1 1 0 1 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information TRAILER # 415

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
843 ~~(803)~~ 743-9985 BL

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 08 12 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month Day Year: 08 12 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237490
a. 40860 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9224 HH PO

South Carolina Departm nt of Health and Environmental Control

52

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 1 3
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985 BL

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name:
8. U.S. EPA ID Number:

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 B 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 445

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
843 (~~803~~) 743-9985 BL

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: W F LACHICOTTE III — Signature: W F Lachicotte III — Month Day Year: 08 12 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HAROLD JACKSON — Signature: Harold Jackson — Month Day Year: 08 12 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

FACILITY

Discrepancy Indication Space
237492

a. 46420 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Neil Anderson — Signature: Neil Anderson — Month Day Year: 08 12 99

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13614
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name:
8. U.S. EPA ID Number:

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

Waste Manifest Document Number
Generator's ID
Transporter's ID
Transporter's Phone: 800-423-8181
Transporter's ID
Transporter's Phone
Facility's ID
Facility's Phone

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BB8-1102
b.
c.
d.

Handling Codes for Wastes Listed Above
TRANSFER OF LIABILITY

15. Special Handling Instructions and Additional Information
TRAILER # 331
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford 843 ~~(803)~~ 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III | Signature: WF Lachicotte III | Month Day Year: 08/12/99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Gough | Signature | Month Day Year: 08/12/99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237499
a. 46580 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D Anderson | Signature | Month Day Year: 08/12/99

South Carolina D partment of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 1 5

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number

State Generator's ID

State Transporter's ID

Transporter's Phone: 800-423-9181

Transporter's ID

Transporter's Phone

State Facility ID

Facility's Phone: (803) 552-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2

b.

c.

d.

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 373

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 08 12 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jerry Smith — Signature: Jerry Smith — Month Day Year: 08 12 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
237493

a. 43940 lbs. c. lbs.

b. lbs. d. lbs.

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

Printed/Typed Name: D Anderson — Signature — Month Day Year: 08 12 99

South Carolina Departm nt of Health and Environmental Control

6.20 (16)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 3616
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone 800-423-8181
Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	0008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-11102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 413

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: WF LACHICOTTE III | Signature: WF Lachicotte | Month Day Year: 08 12 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Darr | Signature | Month Day Year: 08 12 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237496
a. 41780 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: M Anderson | Signature: David Anderson | Month Day Year: 08 13 99

South Carolina Department of Health and Environmental Control

6.23 (17)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: S C 0 1 7 0 0 2 2 5 6 0
Manifest Document No.: 1 3 6 1 7
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 310

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: WF LACHICOTTE III
Signature: WF Lachicotte III
Month Day Year: 08 12 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain
Signature: Stanley Garvain
Month Day Year: 08 12 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

19. Discrepancy Indication Space
237497
a. 42260 lbs.
b. lbs.
c. lbs.
d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: R. Anderson
Signature: Ron Anderson
Month Day Year: 08 12 99

04300

South Carolina Department of Health and Environmental Control

6.15

13

4LC4 HM 13

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 1 8

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: (800) 722-3151

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (804) 462-6003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	0 0 0 0
b.					
c.					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2

b.

c.

d.

15. Special Handling Instructions and Additional Information
TRAILER #401

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF LaChicotte III — Month Day Year: 08 12 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hubert Mckelvaney — Signature: Hubert Mckelvaney — Month Day Year: 08 12 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
237494

a. 50540 lbs. c. lbs.

b. lbs. d. lbs.

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

Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

(18)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 3619

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
Transporter's ID
Transporter's Phone: 800-423-8181
Transporter 2 ID
Transporter 2 Phone
Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-013413-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 415

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average 30 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 08 12 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL BURGESS — Signature: Carl Burgess — Month Day Year: 08 12 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237498

a. 54900 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

MDDU 9224HH15

South Carolina Department of Health and Environmental Control

(14)

6:18

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 2 0

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number
Generator's ID
Transporter's ID
Transporter's Phone: 800-423-3181
State Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone: (803) 452-6003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 445

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing the burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month 0 8 Day 1 2 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: HAROLD JACKSON — Signature: Harold Jackson — Month 0 8 Day 1 2 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
237495

a. 43300 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name — Signature — Month Day Year

(D405)

South Carolina Department of Health and Environmental Control

78580

8

9225 HH01

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 2 1

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number
Generator's ID
Transporter's ID
Transporter's Phone: 800-423-6180
Transporter 2's ID
Transporter 2's Phone
Facility's ID
Facility's Phone: 803-452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Codes
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

Handling Codes for Wastes Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information

TRAILER # 403

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

ON SITE INSPECTOR

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St, S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 0 8 Day 1 3 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Gilbert W Smith Jr — Signature: [signature] — Month 0 8 Day 1 3 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space

237608

a. 44280 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name — Signature — Month Day Year

181600 9225HH02

South Carolina Departm nt of Health and Environmental Control

11:07 30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 2 2
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H 0 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone: 800-423-8181
State Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 B 4 8 - 1 1 0 2
b. - -
c. - -
d. - -

Handling Codes for Wastes Listed Above

WASTE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 373

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature — Month 08 Day 13 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature — Month 08 Day 13 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
a. 46660 lbs. c. lbs.
b. lbs. d. lbs.
237500

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

7LCS HH03

South Carolina Department of Health and Environmental Control

17080 40

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 2 3

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 B A 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 413

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 0 8 Day 1 3 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jimmy Dorr — Signature: [signature] — Month 0 8 Day 1 3 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237506

a. 41900 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: Bob Justice — Signature: [signature] — Month Day Year

South Carolina Departm nt of H alth and Environm ntal Control

11:20

32

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 2 4

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number
S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone 800-423-8181
Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

Handling Codes for Wastes Listed Above
ON SITE INTERIM STORAGE
PRIOR TO OFF SITE RECYCLING

15. Special Handling Instructions and Additional Information
TRAILER # 401

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(~~803~~ 843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing the burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 0 8 1 3 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Mckelvaney — Signature: Hubert Mckelvaney — Month Day Year: 0 8 1 3 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237501

a. 46660 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. Anderson — Signature: [signature] — Month Day Year: 0 8 1 3 9 9

11:25 11:30 9225HH05

South Carolina Department of Health and Environmental Control

33

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 2 5
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone: 800-423-8183
Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone: (803) 552-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 8 - 1 1 1 0 2
b. - -
c. - -
d. - -

Handling Codes for Wastes Listed Above
DHEC BUREAU OF SOLID & HAZARDOUS WASTE MANAGEMENT ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 445
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 0 8 1 3 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HAROLD JACKSON — Signature: [signature] — Month Day Year: 0 8 1 3 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237502

a. 41780 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D. ANDERSON — Signature: [signature] — Month Day Year: 0 8 1 3 9 9

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 13626
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD006913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 310

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
~~(803)~~ 843 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 08 13 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 08 13 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
237505

a. 49980 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 2 7
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 415

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 0 8 1 3 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: CARL BURGESS — Signature: Carl Burgess — Month Day Year: 0 8 1 3 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237503

a. 34820 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

11:59 35

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 2 8

2. Page 1 of 1

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GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 B 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 331

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average 8 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name	Signature	Month Day Year
RICHARD G. NIELSON	[signature]	08 13 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
John Eagle	[signature]	08 13 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

FACILITY

Discrepancy Indication Space
237504

a. 47900 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month Day Year
G. Anderson	David Anderson	08 13 99

South Carolina Department of Health and Environmental Control

74360 16

9225HH09

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13629

2. Page 1 of 1

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

State Manifest Document Number

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 704) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Codes
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above — Handling Codes for Wastes Listed Above

a. PW - 01348 - 11102
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information

TRAILER # ~~[illegible]~~ 456

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
~~(803)~~ 704 743-9985

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 08 13 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Albert W. Smith Jr — Signature: [signature] — Month Day Year: 8 13 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237514

a. 40700 lbs. c. ____ lbs.
b. ____ lbs. d. ____ lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name — Signature — Month Day Year

9225HH10

South Carolina Department of Health and Environmental Control

6:12 27140 3

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 13630
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01843-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 373

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
~~(803)~~ 843 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 08 Day 13 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: [signature] — Month 08 Day 13 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237501

a. 45380 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

922SHH11

South Carolina Department of Health and Environmental Control

81600 11

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13631
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-11102
b.
c.
d.

Handling Codes for Wastes Listed Above

SITE INSPECTOR
SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 401

WO# _____

24 hour em rgency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERAT R'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G. NIELSON
Signature: Richard G. Nielson
Month Day Year: 08 13 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney
Signature: Hubert Muckelvaney
Month Day Year: 08 13 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237510

a. 48240 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Joe Justice
Signature: Joe Justice
Month Day Year: 08 14 99

9225HH12

South Carolina D partment of Health and Environmental Control

79600 14

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13632
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER #445

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G. NIELSON | Signature | Month 08 Day 13 Year 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HAROLD JACKSON | Signature | Month 08 Day 13 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

Discrepancy Indication Space
237513

a. 44120 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9225HH13

South Carolina Departm nt of Health and Environmental Control

77340 13

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No 13633

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD069134099

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01343 - 1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON SITE INSPECTOR
S.C. DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER #415

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month 08 Day 13 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: CARL BURGESS | Signature: Carl Burgess | Month 08 Day 13 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237529

a. 42840 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

9225HH14

South Carolina Department of Health and Environmental Control

80320 12

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13634
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
Generator's ID
Transporter's ID
Transporter's Phone
Transporter 2 ID
Transporter 2 Phone
Facility's ID
Facility's Phone
(803) 152-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR

15. Special Handling Instructions and Additional Information TRAILER # 310

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name	Signature	Month	Day	Year
RICHARD G. NIELSON	[signature]	08	13	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Stanley Garvais	Stanley Garvais	08	13	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space
237511
a. 49600 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR
TRANSPORTER
FACILITY

9225HHIS

South Carolina D partment of Health and Environm ntal Control

78800

9

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13635

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER 331
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Gary L Crawford | Signature: Gary L Crawford | Month Day Year: 08 13 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: John Eagle | Signature: John Eagle | Month Day Year: 08 13 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space
237509

a. 46860 lbs. c. lbs.
b. lbs. d. lbs

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

Printed/Typed Name | Signature | Month Day Year

GENERATOR

TRANSPORTER

FACILITY

9225 HH16

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

7680 13

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13636
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone: 800-25-8181
State Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone: 803-52-500

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Codes
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

Handling Codes for Wastes Listed Above
DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 413
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month Day Year: 08 13 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Darr | Signature: Jimmy Darr | Month Day Year: 08 13 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237512

a. 41900 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name | Signature | Month Day Year

9226HH01

South Carolina Department of Health and Environmental Control

23800 16

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13637
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

Transporter 1 Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

Transporter 2 Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 465

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

ON SITE INSPECTOR

Public reporting burden for this collection of information is estimated to average 15 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 08 14 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GEORGE JACKSON — Signature: George Jackson — Month Day Year: 08 14 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237515

a. 39460 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9226 HH02

South Carolina Departm nt of Health and Environmental Control

79220 17

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 3638
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER # 331

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

ON-SITE INSPECTION
S.C. DEPT. OF HEALTH

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: W F LACHICOTTE III — Signature: W F Lachicotte III — Month Day Year: 08 14 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle — Signature: John Eagle — Month Day Year: 08 14 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237516

a. 47440 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

7266HH03

South Carolina Department of Health and Environmental Control

79360 18

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13639

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (1 ad)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER 310

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 27 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reading instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 08 14 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 08 14 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237517

a. 48860 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Dan Justice — Signature: Dan Justice — Month Day Year: 08 14 99

9226HH04

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

766.00 20

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13640
2. Page 1 of 1

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

State Manifest Document Number

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SC007037598 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Codes
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above — Handling Codes for Wastes Listed Above

a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER 373

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month 08 Day 14 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: Jerry Smith — Month 08 Day 14 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237518

a. 45160 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

4226 HH05

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13641

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: IOHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER 401

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 47 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month 08 Day 14 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney — Signature: Hubert Muckelvaney — Month 08 Day 14 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237519

a. 47460 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jon Justice — Signature: Jon Justice — Month Day Year

7226HH06

South Carolina Department of Health and Environmental Control

80620 24

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 36472
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD017037585

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. Transporter's ID
F. Transporter's Phone
G. Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-013443-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER 413

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

INSPECTOR

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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GENERATOR

Printed/Typed Name: WF Lachicotte III — Signature: WF Lachicotte III — Month 08 Day 14 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Derr — Signature — Month 08 Day 14 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237521

a. 45000 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9226HHU+

South Carolina D partment of Health and Environm ntal Control

23

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13643

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	0008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER 403

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III | Signature: WF Lachicotte III | Month Day Year: 08 14 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: John Sizemore | Signature: John Sizemore | Month Day Year: 08 14 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space 237520

a. 40440 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: Jan Justice | Signature: Jan Justice | Month Day Year: 08 14 99

1226 HHUO

South Carolina D partment of Health and Environmental Control

26

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13644
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01343 - 1102
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 456
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: WF LACHICOTTE III
Signature: WF Lachicotte III
Month Day Year: 08 14 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert W. Smith Jr
Signature: R W Smith
Month Day Year: 08 14 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237523
a. 45060 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Tom Justice
Signature: Tom Justice
Month Day Year: 08 14 99

9226HH09

South Carolina Department of Health and Environmental Control

79700 25

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 017002256 Manifest Document No. 13645
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-0134 3-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER 445
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE
Signature: WF Lachicotte III
Month Day Year: 08 14 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Harold Jackson
Signature: Harold Jackson
Month Day Year: 08 14 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

19. Discrepancy Indication Space
237522
a. 44400 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name
Signature
Month Day Year

9226HH10

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

79940 8

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 | Manifest Document No. 3646
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR
S.C. DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 331
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III | Signature: WF Lachicotte III | Month Day Year: 08 14 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle | Signature: [signature] | Month Day Year: 08 14 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237525
a. 47640 lbs. c. lbs
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9226HHH

South Carolina D partment of H alth and Environm ntal Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

81320

11

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13647
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 310
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 08 14 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garrain — Signature: Stanley Garrain — Month Day Year: 08 14 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
a. 50000 lbs. c. lbs.
b. lbs. d. lbs.
23527

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

GENERATOR
TRANSPORTER
FACILITY

9226 HH 12

South Carolina D partment of Health and Environm ntal Control

17820 3

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13648
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to Chief Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III
Signature: WF Lachicotte III
Month Day Year: 08 14 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith
Signature: Jerry Smith
Month Day Year: 08 14 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

Discrepancy Indication Space
237524
a. 46200 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

GENERATOR
TRANSPORTER
FACILITY

South Carolina Department of Health and Environmental Control

Bureau of Solid Waste Management
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

7638 23

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13649
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-013431-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

INSPECTOR OF HEALTH ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER 403

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 18 minutes for transporters and 16 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data and completing and reviewing the form. Send comments regarding the burden estimate including suggestions for reducing this burden to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460 and to the Office of Information and Regulatory Affairs, Office of Management and Budget Washington D.C. 20503

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Printed/Typed Name	Signature	Month	Day	Year
WF LACHICOTTE III	WF Lachicotte III	08	14	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
John Sizemore	John Sizemore	08	14	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space
a. 42340 lbs. c. lbs
b.
23916

South Carolina Department of Health and Environmental Control

9226HHH4

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13650

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01343 - 1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
SC DEPT OF HEALTH
ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER 401
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: W F Rachicotte III | Signature: W F Rachicotte III | Month 08 Day 14 Year 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hilbert McKelvaney | Signature: Hilbert McKelvaney | Month 08 Day 14 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

Discrepancy Indication Space
237526

a. 56860 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

9226 HH/15

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13651
2. Page 1 of 1

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3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-0343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 456
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: W F LACHICOTTE III — Signature: W F Lachicotte III — Month Day Year: 08 14 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert W Smith Jr — Signature: [signature] — Month Day Year: 08 14 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
a. 51400 lbs. c. lbs.
b. lbs. d. lbs.
237530

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9226HH16

South Carolina D partment of Health and Environmental Control

R5020

12

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No 1 3 6 5 2

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S C DEPT OF HEALTH
ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 445

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate including suggestions for reducing this burden, to Chief Information Policy Branch, PM-223 U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month 08 Day 14 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HAROLD JACKSON — Signature: Harold Jackson — Month 08 Day 14 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
a. 50000 lbs. c. lbs
b. lbs. d lbs

237528

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

80080 17 922814401

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No 13653
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9
C. State Transporter's ID
D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5
G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTION SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER #413

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 0 8 Day 1 6 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Derr — Signature: [signature] — Month 0 8 Day 1 6 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237531
a. 44600 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 1 — Manifest Document No. 13654
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter 1 Phone: (803) 72-[illegible]
Transporter 2 ID
Transporter 2 Phone
Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #331

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 0 8 Day 1 6 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle — Signature: [signature] — Month 0 8 Day 1 6 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237532

a. 47420 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9228HH03

South Carolina Department of Health and Environmental Control

7720 21

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 36555
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER # 373

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON | Signature | Month 08 Day 16 Year 99

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith | Signature | Month 08 Day 16 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

Discrepancy Indication Space
237533

a. 45720 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

FACILITY

South Carolina Department of Health and Environmental Control

78580

24

92284404

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 3656
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d					

GENERATOR

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER # 401

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name	Signature	Month	Day	Year
Richard G. Nielson	[signature]	08	16	99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Hubert Meckelvaney	Hubert Meckelvaney	08	16	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

Discrepancy Indication Space

237535

a. 44940 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[signature]			

92284405

South Carolina Department of Health and Environmental Control

29460

23

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 3657

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 445

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 0 8 Day 1 6 Year 9 9

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HAROLD JACKSON — Signature: [signature] — Month 0 8 Day 1 6 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
237534

a. 44580 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9228HH06

South Carolina Department of Health and Environmental Control

30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

7400

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13658

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 456

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G. NIELSON | Signature | Month 08 Day 16 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Robert W Smith Jr | Signature | Month 08 Day 16 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space

a. 44320 lbs. c. lbs.

b. lbs. d. lbs.

237537

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

Printed/Typed Name | Signature | Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13659
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
MALCOR # 413

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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GENERATOR

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Printed/Typed Name: RICHARD G. NIELSON | Signature | Month Day Year: 08 16 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr | Signature | Month Day Year: 08 16 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237536

a. 42280 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: M. Justice | Signature | Month Day Year

92284408

South Carolina Department of Health and Environmental Control

78906 17

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13660

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRACER # 331

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: RICHARD G. NIELSON | Signature | Month Day Year: 08 16 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle | Signature | Month Day Year: 08 16 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237542

a. 47120 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9228HH09

South Carolina Department of Health and Environmental Control

7798

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 3661

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	0008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER # 373

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C 20503.

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GENERATOR

Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month 08 Day 16 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith | Signature: [signature] | Month 08 Day 16 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237538

a. 46820 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

South Carolina Department of Health and Environmental Control

9228HH18

18

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 017002256 0 — Manifest Document No. 3662

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	0008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER # 445

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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GENERATOR

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Printed/Typed Name: RICHARD G. NIELSON — Signature — Month Day Year: 08 16 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: HAROLD JACKSON — Signature — Month Day Year: 08 16 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
237543

a. 42180 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name — Signature — Month Day Year

9228HH11

South Carolina Department of Health and Environmental Control

82220

15

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 — Manifest Document No. 13623

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	[redacted]
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

[redacted]

15. Special Handling Instructions and Additional Information
TRAILER # 310

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 08 Day 16 Year 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Gardain — Signature: Stanley Gardain — Month 08 Day 16 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
237540

a. 51320 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature

GENERATOR — TRANSPORTER — FACILITY

9228HH12

South Carolina Department of Health and Environmental Control

83720 14

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13664
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	0008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-013433-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 401

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month 08 Day 16 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney | Signature: Hubert Muckelvaney | Month 08 Day 16 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237539

a. 50320 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9228 HH13

South Carolina Department of Health and Environmental Control

79560 16

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13665
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD006891340 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	01	DT	30	Y	008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER 413

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: MR LACHICOTTE
Signature: W7 Lachicotte III
Month Day Year: 08 16 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr
Signature: Jimmy Dorr
Month Day Year: 08 16 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237541

a. 43800 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

4228 HH 14

South Carolina Department of Health and Environmental Control

80280 20

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 3666

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 B x 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER 456

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 08 16 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert W Smith Jr — Signature: [signature] — Month Day Year: 08 16 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space

a. 46600 lbs. c. ____ lbs.
b. ____ lbs. d. ____ lbs.

237544

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9229HH01

South Carolina Department of Health and Environmental Control

16900 26

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13627
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

GENERATOR

J. Additional Descriptions for Materials Listed Above — K. Handling Codes for Wastes Listed Above

a. PW - 01343 - 1102
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER # 465

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 08 17 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month Day Year: 08 17 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237545

a. 42200 lbs. c. ____ lbs.
b. ____ lbs. d. ____ lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9229HHQZ

South Carolina Department of Health and Environmental Control

800460 30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 8

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 310
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G NIELSON — Signature: [signature] — Month Day Year: 08 17 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 08 17 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
a. 50200 lbs. c. lbs
b. lbs. d. lbs.
237548

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9229HH93

South Carolina Department of Health and Environmental Control

75000

27

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13669
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 373

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month 08 Day 17 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: [signature] — Month 08 Day 17 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
237546

a. 44120 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] — Signature: [signature] — Month Day Year

9229HH04

South Carolina Department of Health and Environmental Control

78340

261X

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC0170022556 Manifest Document No. 13670
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-0343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR
S.C. DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 331
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: RICHARD G. NIELSON
Signature: [signature]
Month Day Year: 08 17 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Edgar Eargle
Signature: [signature]
Month Day Year: 08 17 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
237547

a. 46780 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator, Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature

9229HH05

South Carolina Department of Health and Environmental Control

17300 33

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13671

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 401

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

SITE INSPECTOR DEPT OF HEALTH

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month Day Year: 08 17 99

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hubert Muckelvaney | Signature: Hubert Muckelvaney | Month Day Year: 08 17 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

19. Discrepancy Indication Space
237550

a. 44020 lbs. c. lbs.
b. lbs. d. lbs.

FACILITY

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

Printed/Typed Name | Signature | Month Day Year

9229HH06

South Carolina Department of Health and Environmental Control

76960 32

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 017002256 Manifest Document No. 13672
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-0343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 445

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month Day Year: 08/17/99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HAROLD JACKSON | Signature: Harold Jackson | Month Day Year: 08/17/99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237549

a. 41400 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9229HH07

South Carolina Department of Health and Environmental Control

85120 34

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 / Manifest Document No. 3673

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 456

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate including suggestions for reducing this burden to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G. NIELSON | Signature | Month 08 Day 17 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Robert W. Smith Jr. | Signature | Month 08 Day 17 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
237551

a. 51560 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

9229HH08

South Carolina D partment of Health and Environmental Control

81820 36

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13674

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 465
9229HH08
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 08 Day 17 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month 08 Day 17 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237552
a. 46480 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9229HH09

South Carolina D partment of Health and Environm ntal Control

7716C

2

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 7 5

2. Page 1 of 1

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

A. State Manifest Document Number

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone (800) 423-8181

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone (803) 452-6003

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2

b.

c.

d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

TRAILER# 373

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: GARY L. CRAWFORD — Signature: [signature] — Month Day Year: 08 17 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jerry Smith — Signature: [signature] — Month Day Year: 08 17 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space

237553

a. 45620 lbs. c. lbs.

b. lbs. d. lbs.

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

Printed/Typed Name — Signature — Month Day Year

9229HH10

South Carolina Department of Health and Environmental Control

81400

9

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: SC 017002256 Manifest Document No.: 13676

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 331
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C 20503

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month Day Year: 08 17 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle | Signature: John Eagle | Month Day Year: 08 17 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

Discrepancy Indication Space
237554

a. 49660 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

GENERATOR
TRANSPORTER
FACILITY

9229HH11

South Carolina Department of Health and Environmental Control

8150 14

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13677
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone: 800-423-8181
Transporter's ID
Transporter's Phone
Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

SITE INSPECTOR DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 310
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name	Signature	Month Day Year
GARY L CRAWFORD	Gary L Crawford	08 17 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
Stanley Garvain	Stanley Garvain	08 17 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

FACILITY

Discrepancy Indication Space
237554

a. 50240 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month Day Year

9229 HH12

South Carolina Department of Health and Environmental Control

83320

15

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13678

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

State Manifest Document Number

State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

State Transporter's ID

Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

State Transporter's ID

Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

State Facility's ID

Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 445

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 08 Day 17 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: HAROLD JACKSON | Signature: Harold Jackson | Month 08 Day 17 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237557

a. 48160 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

9229HH13

South Carolina Department of Health and Environmental Control

88740 13

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13679
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 401
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

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GENERATOR

16 **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: GARY L. CRAWFORD | Signature: Gary L Crawford | Month 08 Day 17 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney | Signature: Hubert Muckelvaney | Month 08 Day 17 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237555

a. 54940 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9229HH14

South Carolina Department of Health and Environmental Control

75000 16

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

NIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13680
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

GENERATOR

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 456
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: GARY L. CRAWFORD | Signature: Gary L Crawford | Month Day Year: 08 17 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert W Smith Jr | Signature: Robert W Smith | Month Day Year: 08 17 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
237558
a. 41840 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9230HH01

South Carolina D partm nt of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13681
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

State Manifest Document Number
State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

State Transporter's ID
Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

Transporter's ID
Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

Handling Codes for Wastes Listed Above

SITE INSPECTOR
SC DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER# 413
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD — Signature — Month Day Year: 0 8 1 8 9 9

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Darr — Signature — Month Day Year: 0 8 1 8 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
237769
a. 43820 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature

GENERATOR — TRANSPORTER — FACILITY

9230HH02

South Carolina Department of Health and Environmental Control

76380 21

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13682
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH

15. Special Handling Instructions and Additional Information
TRAILER#465
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name	Signature	Month Day Year
GARY L CRAWFORD	Gary L Crawford	08 18 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
DAVID WINTER	David Winter	08 18 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

19. Discrepancy Indication Space
239140
a. 41340 lbs. c. lbs.
b. lbs. d. lbs.

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

GENERATOR
TRANSPORTER
FACILITY

4230HH03

South Carolina Department of Health and Environmental Control

80120 25

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13683
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTION

15. Special Handling Instructions and Additional Information
TRAILER #331
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month Day Year: 08 18 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle — Signature: John Eagle — Month Day Year: 08 18 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
239141
a. 48520 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9230HH04

South Carolina D partment of Health and Environmental Control

77480 26

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13685
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

INSPECTOR DEPT. OF HEALTH ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

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Printed/Typed Name: GARY L CRAWFORD
Signature: Gary L Crawford
Month Day Year: 08 18 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith
Signature: Jerry Smith
Month Day Year: 08 18 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

19. Discrepancy Indication Space
239142
a. 46020 lbs. c. lbs.
b. lbs. d. lbs.

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

9230HH05

South Carolina Department of Health and Environmental Control

81220 27

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC0170022560 Manifest Document No. 36856

2. Page 1 of 1

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

State Manifest Document Number

State Generator's ID

State Transporter's ID

Transporter's Phone 800-423-8181

Transporter's ID

Transporter's Phone

State Facility's ID

Facility's Phone (803) 452-5003

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 310

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD
Signature: Gary L Crawford
Month Day Year: 08 18 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain
Signature: Stanley Garvain
Month Day Year: 08 18 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

19 Discrepancy Indication Space
239143

a. 5000 lbs. c. lbs.
b. lbs. d. lbs.

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

GENERATOR

TRANSPORTER

FACILITY

9230HH06

South Carolina Departm nt of H alth and Environmental Control

80500 30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 8 7
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

State Manifest Document Number
State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

State Transporter's ID
Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

Transporter's ID
Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 401 401 PC
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month Day Year: 0 8 1 8 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney — Signature: Hubert Muckelvaney — Month Day Year: 0 8 1 8 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
239145

a. 46840 lbs. c. lbs
b. lbs. d. lbs

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9230HH07

South Carolina D partment of Health and Environmental Control

77946 29

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 3688
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. Transporter's ID
F. Transporter's Phone
G. Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

Handling Codes for Wastes Listed Above
ON-SITE MANIFEST
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 445
WO#
24 hour em rgency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment, OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month Day Year: 08 18 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HAROLD JACKSON | Signature: Harold Jackson | Month Day Year: 08 18 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239144
a. 42820 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9230HH08

South Carolina D partment of Health and Environmental Control

35

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

88220

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13689
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125
10. U.S. EPA ID Number: SCD 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-0134 3-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTION
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 456
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: GARY L. CRAWFORD — Signature: [signature] — Month Day Year: 08 18 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert W Smith Jr — Signature: [signature] — Month Day Year: 8 18 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
239146
a. 55120 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature

GENERATOR — TRANSPORTER — FACILITY

9230HH09

South Carolina Department of Health and Environmental Control

74680 36

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 36900
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

State Manifest Document Number

State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

Transporter's ID

Transporter's Phone 800-423-818

7. Transporter 2 Company Name
8. U.S. EPA ID Number

Transporter's ID

Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

Facility's ID

Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	J. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

Handling Codes for Wastes Listed Above
SITE INSPECTOR
DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 413

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD | Signature: [signature] | Month Day Year: 08 18 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jimmy Dorr | Signature: [signature] | Month Day Year: 08 18 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239147

a. 39440 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

P230HH10

South Carolina Department of Health and Environmental Control

74000 30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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IFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 36911
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

State Manifest Document Number
State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

State Transporter's ID
Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

State Transporter's ID
Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

State Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	01	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-0134 3-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 465
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

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Printed/Typed Name: Gary L Crawford | Signature: Gary L Crawford | Month Day Year: 08 18 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month Day Year: 08 18 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239148
a. 39100 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9230 HH 11

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

83180 16

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 36972
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 331

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 08 Day 18 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle | Signature: John Eargle | Month 08 Day 18 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239152

a. 51160 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9230 HH 12

South Carolina D partment of Health and Environmental Control

79460

8

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 3693

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 373

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month 08 Day 18 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: Jerry Smith — Month 08 Day 18 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
239149

a. 47840 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9230HH13

South Carolina D partment of Health and Environmental Control

80960 14

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13694
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

STATE INSPECTOR DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER 310

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month 08 Day 18 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month 08 Day 18 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space

239151

a. 49700 lbs.
b. lbs.
c. lbs.
d. lbs.

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

Printed/Typed Name — Signature — Month Day Year

9230 HH14

South Carolina Department of Health and Environmental Control

83800 13

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13695
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Saf ty-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

DEPUTY INSPECTOR
S.C. DEPT OF HEALTH

15. Special Handling Instructions and Additional Information TRAILER 401

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: WF Lachicotte III | Signature: WF Lachicotte III | Month Day Year: 08/18/99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney | Signature: Hubert Muckelvaney | Month Day Year: 08/18/99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
239150

a. 50460 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name | Signature | Month Day Year

9251 1T10U1

South Carolina Departm nt of H alth and Environmental Control

7100 24

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13696
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 B x 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENT

15. Special Handling Instructions and Additional Information TRAILER # 413

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month Day Year: 08 19 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Darr | Signature: [signature] | Month Day Year: 08 19 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239154

a. 42160 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

9231HH02

South Carolina Department of Health and Environmental Control

23

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 017002256 Manifest Document No. 36977

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
Wills Trucking, Inc.

6. U.S. EPA ID Number
OHD068913409

C. State Transporter's ID

D. Transporter's Phone 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 B x 255
Pin wood, South Carolina 29125

10. U.S. EPA ID Number
SCD070375985

G. State Facility's ID

H. Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

STATE INSPECTOR
DEPT OF HEALTH
ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
MANIFEST # 465

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. SW Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month Day Year: 08 19 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month Day Year: 08 19 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239153

a. 39200 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

923174 US

South Carolina Department of Health and Environm ntal Control

81400 26

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 6 9 8

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Saf ty-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2

b.

c.

d.

K. Handling Codes for Wastes Listed Above

SITE INSPECTOR
DEPT OF HEALTH
ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 445

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 0 8 1 9 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Harold Jackson — Signature: Harold Jackson — Month Day Year: 0 8 1 9 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space

a. 45560 lbs. c. lbs.

b. lbs. d. lbs.

239155

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

Printed/Typed Name: [illegible] — Signature: [signature] — Month Day Year: 08 [illegible]

92311HH04

South Carolina Department of Health and Environmental Control

82400 27

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 3699
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

SITE INSPECTOR
DEPARTMENT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 400

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month Day Year: 08 19 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Don Houston | Signature: Don Houston | Month Day Year: 08 19 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

Discrepancy Indication Space
239156

a. 46720 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

4231 HH05

South Carolina Department of Health and Environmental Control

78180

29

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13700

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kl en (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

STATE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER # 373

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON | Signature | Month Day Year: 08 19 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jerry Smith | Signature | Month Day Year: 08 19 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space

239157

a. 46780 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: Jim Justice | Signature | Month Day Year: 08 19 99

9231HH06

South Carolina D partm nt of Health and Environmental Control

B1800 30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13701

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #310

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: RICHARD G. NIELSON — Signature: [signature] — Month Day Year: 08 19 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 08 19 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
239158

a. 50660 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

4251HH01

South Carolina Department of Health and Environmental Control

78000 32

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 37702
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR

15. Special Handling Instructions and Additional Information
TRAILER # 401
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month 08 Day 19 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney | Signature: Hubert Muckelvaney | Month 08 Day 19 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239159
a. 44900 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] | Signature: [signature] | Month Day Year

South Carolina Department of Health and Environmental Control

80520 33

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13703
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	01	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-0143-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

SITE INSPECTOR
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER #331

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: RICHARD G. NIELSON | Signature: [signature] | Month Day Year: 08 19 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Earle | Signature: [signature] | Month Day Year: 08 19 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239160
a. 48380 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice | Signature: [signature] | Month Day Year: 08 19 99

76320

9231HH09

South Carolina Department of Health and Environmental Control

15:05

39

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 017002256 0 Manifest Document No. 13704

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102

b.

c.

d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT. OF HEALTH
& ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER #465

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 08 Day 19 Year 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month 08 Day 19 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space
239161

a. 42020 lbs. c. lbs.

b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

GENERATOR

TRANSPORTER

FACILITY

South Carolina Department of Health and Environmental Control

15:19

(41)

9231 #11 10

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: SC 017002256 0 — Manifest Document No.: 13705

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID

D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name

8. U.S. EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID

H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR
S.C. DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 413

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Gary C Crawford — Signature: [signature] — Month Day Year: 08 19 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jimmy Dorr — Signature: [signature] — Month Day Year: 08 19 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
239168

a. 39760 lbs. c. ____ lbs.
b. ____ lbs. d. ____ lbs.

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

Printed/Typed Name: D Anderson — Signature: [signature] — Month Day Year

South Carolina Department of Health and Environmental Control

15:21

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13706

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON SITE INSPECTION
S.C. DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
Trailer# 445
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month Day Year: 08 19 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HAROLD JACKSON | Signature: Harold Jackson | Month Day Year: 08 19 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

Discrepancy Indication Space
239163
a. 43300 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D Anderson | Signature: David Anderson | Month Day Year: 08 1999

GENERATOR
TRANSPORTER
FACILITY

South Carolina Department of Health and Environmental Control

15:46 (46) 9231 HH 12

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13707
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01343 - 1102
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT OF HEALTH

15. Special Handling Instructions and Additional Information TRAILER #400

WO# ___

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting [illegible] estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate including suggestions for reducing this burden to Chief, Information Policy Branch, PM-223 U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Gary L Crawford — Signature: Gary L Crawford — Month Day Year: 08 19 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston — Signature: Don Houston — Month Day Year: 08 19 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
239162

a. 44040 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] — Signature: [illegible] — Month Day Year

9231HH13

South Carolina Departm nt of Health and Environmental Control

74980 5

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 7 0 8

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number
State Generator's ID
Transporter's ID
Transporter's Phone: 800-423-5157
Transporter's ID
Transporter's Phone
Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information
TRAILER # 373

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

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Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month Day Year: 08 19 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith — Signature: Jerry Smith — Month Day Year: 08 19 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
23916 6

a. 43940 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

9231HH14

South Carolina Department of Health and Environmental Control

80440 15

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13709
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Saf ty-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

Additional Descriptions for Materials listed above

a. PW-01343-1102
b. -
c. -
d. -

15. Special Handling Instructions and Additional Information
TRAILER # 310

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 08 Day 19 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain | Signature: Stanley Garvain | Month 08 Day 19 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239169

a. 49240 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jim Justice | Signature: Jim Justice | Month Day Year

9231 HHS

South Carolina Department of Health and Environmental Control

80630 14

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13710

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: (800) 253-8113
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. PW-01343-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information
TRAILER # 331

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: GARY L CRAWFORD — Signature — Month Day Year: 08 19 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eargle — Signature — Month Day Year: 08 19 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
239167

a. 48740 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Ron Justice — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

83060 13

9251HH10

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13711

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 401

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: Gary L Crawford — Signature: Gary L Crawford — Month Day Year: 08 19 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hubert Muckelvaney — Signature: Hubert Muckelvaney — Month Day Year: 08 19 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space

a. 49280 lbs. c. lbs.
b. lbs. d. lbs.

239165

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

Printed/Typed Name: D. Justice — Signature — Month Day Year: 08 20 99

9232HH01

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays (803) 253-6488

72980 17

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Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13712
2. Page 1 of 1

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

[redacted]

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	[redacted]
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d					

[redacted]

a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information
TRAILER # 413
9232HH01
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

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Printed/Typed Name: GARY L CRAWFORD — Signature: [signature] — Month Day Year: 08 20 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Darr — Signature: [signature] — Month Day Year: 08 20 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
239164

a. 42400 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] — Signature: [signature] — Month Day Year

9232 HH02

South Carolina Department of Health and Environmental Control

7900 18

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 3713

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Will's Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 445
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 48 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: Gary L Crawford | Signature: Gary L Crawford | Month Day Year: 10 8 2 0 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Harold Jackson | Signature: Harold Jackson | Month Day Year: 10 8 2 0 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239170

a. 42540 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name | Signature | Month Day Year

South Carolina D partment of H alth and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 Manifest Document No. 3 7 7 4

2. Page 1 of 1

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3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kl en (Pinewood), Inc.
Rt 1 B x 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

Day Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (1 ad)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

15. Special Handling Instructions and Additional Information
TRAILER # 400
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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GENERATOR

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Printed/Typed Name: Gary L Crawford | Signature: Gary L Crawford | Month 08 Day 20 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston | Signature: Don Houston | Month 08 Day 20 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
a. 49080 lbs. c. lbs.
b. lbs. d. lbs.
239172

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice | Signature: Jan Justice | Month Day Year 08 20 99

9232 H404

South Carolina Departm nt of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

70000 20

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Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 7 1 5 — 2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: 0 H D 0 6 8 9 1 3 4 0 9

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

G. Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 304
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

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Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month 08 Day 20 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month 08 Day 20 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
239171

a. 38 1 6 0 0 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

80300

27

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13716

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (1 ad)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

J. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 331
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name: Gary L Crawford | Signature | Month Day Year: 08 20 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle | Signature | Month Day Year: 08 20 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
a. 48680 lbs. c. lbs.
b. lbs. d. lbs.
239173

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jim Justice | Signature | Month Day Year

9232 HH06

South Carolina Department of Health and Environmental Control

79080 30

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 3 7 1 7
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

State Manifest Document Number

State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

State Transporter's ID

Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

Transporter's ID

Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

Facility's ID

Facility's Phone: 803-452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #310

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Gary L Crawford — Signature: Gary L Crawford — Month Day Year: 08 20 99

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain — Signature: Stanley Garvain — Month Day Year: 08 20 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

TRANSPORTER

Discrepancy Indication Space
239175

a. 47940 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

FACILITY

9232HH07

South Carolina Department of Health and Environmental Control

75480

29

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 7 1 8

2. Page 1 of 1

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3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

F. Transporter's Phone: 800-423-8161

W. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information
TRAILER #401
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: GARY L CRAWFORD — Signature: [signature] — Month 08 Day 20 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney — Signature: [signature] — Month 08 Day 20 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
239174

a. 41800 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

7L5 LHH08

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

78360 32

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13719
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

WASTE INSPECTOR DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 373
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

GENERATOR

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Printed/Typed Name: Gary L Crawford | Signature: Gary L Crawford | Month Day Year: 08 20 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jerry Smith | Signature: Jerry Smith | Month Day Year: 08 20 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239176
a. 47520 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jon Justice | Signature | Month Day Year: 08 20 99

9232HH09

South Carolina Department of Health and Environmental Control

80120 41

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 6-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13720
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 413
WO#
24 hour em rgency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month 08 Day 20 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Dorr — Signature: Jimmy Dorr — Month 08 Day 20 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
239177

a. 44720 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mg
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

82120 16

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 372
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD007037598 5

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-013413-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above
ON-SITE INSPECTED
SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 456
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average 37 minutes for generators, 15 minutes for transporters and 1[illegible] minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing the burden, to Chief, Information Policy Branch PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: GARY L CRAWFORD
Signature: Gary L Crawford
Month Day Year: 08 20 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert W Smith Jr
Signature: Robert W Smith
Month Day Year: 08 20 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

19. Discrepancy Indication Space
239195
a. 46800 lbs. c. ____ lbs.
b. ____ lbs. d. ____ lbs.

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

9232#H 11

South Carolina Departm nt of Health and Environmental Control

78580 42

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 3722
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

State Manifest Document Number

State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

State Transporter's ID

Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

State Transporter's ID

Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

State Facility's ID

Facility's Phone: (803) 462-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

Handling Codes for Wastes Listed Above

SOLID WASTE INSPECTOR S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
TRAILER # 445

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

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Printed/Typed Name: GARY L CRAWFORD | Signature: Gary L Crawford | Month 08 Day 20 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HAROLD JACKSON | Signature: Harold Jackson | Month 08 Day 20 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239178

a. 43460 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13723

2. Page 1 of 1

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3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD006891409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER #400
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GARY L CRAWFORD — Signature — Month Day Year: 08 26 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston — Signature — Month Day Year: 08 26 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

Discrepancy Indication Space
239180
a. 45600 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice — Signature — Month Day Year

9232HH13

South Carolina Department of Health and Environmental Control

90060 45

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

FORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13724
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8181

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. State Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

ON-SITE INSPECTOR S.C. DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information
Trailer 304

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W. Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Gary L Crawford | Signature: Gary L Crawford | Month 08 Day 20 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID WINTER | Signature: David Winter | Month 08 Day 20 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239179
a. 38760 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] | Signature | Month Day Year

South Carolina D partm nt of Health and Environm ntal Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002560 Manifest Document No. 13725
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

Facility's Phone (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 331

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: Gary L Crawford | Signature: Gary L Crawford | Month 08 Day 20 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Eagle | Signature: John Eagle | Month 08 Day 20 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

Discrepancy Indication Space
239182

a. 50120 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Dan Justice | Signature: Dan Justice | Month 08 Day 20 Year 99

South Carolina Departm nt of Health and Environmental Control

81020 50

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13726
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter 1 Phone 800-423-8181
E. Transporter 2 ID
F. Transporter 2 Phone
G. Facility's ID
H. Facility's Phone 803 452-8003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

GENERATOR

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER 310

WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III
Signature: WF Lachicotte III
Month Day Year: 08 20 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Stanley Garvain
Signature: Stanley Garvain
Month Day Year: 08 20 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
239181
a. 49980 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Jan Justice
Signature: Jan Justice
Month Day Year: 08 27 99

South Carolina Department of Health and Environmental Control

(59)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 13727

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW-013431-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER 401

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

GENERATOR

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month Day Year: 08 20 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hubert Mckelvaney — Signature: Hubert Mckelvaney — Month Day Year: 08 20 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
239183

a. 45600 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: D. Anderson — Signature: D. Anderson — Month Day Year: 08 20 99

South Carolina Department of Health and Environmental Control

(5)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 13728
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

A. State Manifest Document Number
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-423-8181
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone (803) 452-5003

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01343-1102
b.
c.
d.

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information TRAILER 413
WO# _____
24 hour emergency contact: Rick Nielson or Gary Crawford (843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. SW, Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: W F LACHICOTTE III
Signature: W F Lachicotte III
Month Day Year: 08 20 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Jimmy Darr
Signature: [illegible]
Month Day Year: 08 20 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
239184

a. 41340 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Anderson
Signature: [illegible]
Month Day Year: 08 20 99

South Carolina Department of Health and Environmental Control

8.54 21

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) [illegible]-4900
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 3 7 2 9

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number
State Generator's ID
Transporter's ID
Transporter's Phone: 800-423-9181
Transporter 2 ID
Transporter 2 Phone
Facility's ID
Facility's Phone: (803) 452-5005

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. P W - 0 1 3 4 3 - 1 1 0 2
b.
c.
d.

Handling Codes for Wastes Listed Above
[illegible] INSPECTOR
[illegible] CONTROL

15. Special Handling Instructions and Additional Information TRAILER 445

WO# _____

24 hour em rgency contact: Rick Nielson or Gary Crawford
(843) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

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Printed/Typed Name: WF LACHICOTTE III — Signature: WF Lachicotte III — Month 08 Day 20 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Harold Jackson — Signature: Harold Jackson — Month 08 Day 20 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
239188

a. 46340 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: A. Anderson — Signature: A. Anderson — Month 08 Day 23 Year 99

South Carolina Department of Health and Environmental Control

7:48

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13730

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (~~803~~ 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 B N 8 - 1 1 0 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information: TRAILER 304

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford 843 (~~803~~) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

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Printed/Typed Name	Signature	Month	Day	Year
WF LACHICOTTE III	WF Lachicotte III	08	20	99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
DAVID WINTER	David Winter	08	20	99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space
239185

a. 45440 lbs. c. _____ lbs.
b. _____ lbs. d. _____ lbs.

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

Printed/Typed Name	Signature	Month	Day	Year
H Anderson	Paul Anderson	08	23	99

South Carolina Department of Health and Environmental Control

7.50 (16)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 0 Manifest Document No. 13731
2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (843 803) 743-9985 D. H. BL

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

C. State Transporter's ID
D. Transporter's Phone: 800-423-8184

7. Transporter 2 Company Name
8. U.S. EPA ID Number

E. Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

G. Facility's ID
H. Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. PW - 01 B A 8 - 1 1 1 0 2
b.
c.
d.

15. Special Handling Instructions and Additional Information TRAILER 400

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
BL 843(803) 743-9985 D. H.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name: WF LACHICOTTE III
Signature: WF Lachicotte III
Month Day Year: 08 20 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Houston
Signature: Don Houston
Month Day Year: 08 20 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

Discrepancy Indication Space
239186

a. 465600 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D Anderson
Signature: D Anderson
Month Day Year: 08 23 99

South Carolina Departm nt of H alth and Environm ntal Control

9235HH01

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 1 3 7 3 2

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone AC 843) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

State Manifest Document Number

State Generator's ID

State Transporter's ID

Transporter's Phone: 800-423-8161

Transporter's Phone

Facility's Phone: (803) 452-5002

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					

J. Additional Descriptions for Materials Listed Above

a. P W - 0 1 B A B - 1 1 1 0 2

b.

c.

d.

Handling Codes for Wastes Listed Above

ONSITE TREATED, DISPOSED OR RECYCLED
S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information

TRAILER 401

WO# _____

24 hour emergency contact: Rick Nielson or Gary Crawford
AC 843 (803) 743-9985

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Printed/Typed Name: Gary L Crawford — Signature: Gary L Crawford — Month 0 8 Day 2 3 Year 9 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Hubert Muckelvaney — Signature: Hubert Muckelvaney — Month 0 8 Day 2 3 Year 9 9

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space

239187

a. 47740 lbs. c. lbs.

b. lbs. d. lbs.

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

Printed/Typed Name — Signature — Month Day Year

South Carolina Departm nt of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 137133
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125
10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d					

J. Additional Descriptions for Materials Listed Above — K. Handling Codes for Wastes Listed Above

a. P W - 0 1 3 H 8 - 1 1 0 2
b. - -
c. - -
d. - -

15. Special Handling Instructions and Additional Information
TRAILER # 413
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St. S.W., Washington, D.C 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Printed/Typed Name	Signature	Month Day Year
Gary L Crawford	Gary L Crawford	08 23 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
Jimmy Dorr	Jimmy Dorr	08 23 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

Discrepancy Indication Space
239189
a. 42186 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name	Signature	Month Day Year
Dan Justice	Dan Justice	08 23 99

GENERATOR — TRANSPORTER — FACILITY

South Carolina Department of Health and Environm ntal Control

(32)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

IIFORM HAZARDOUS NASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 13734

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010
DW #4C843

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	D 0 0 8
b.					
c.					
d					

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

a. P W - 0 1 B 4 B - 1 1 0 2
b.
c.
d.

15. Special Handling Instructions and Additional Information
TRAILER # 304

WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
DW #4C843 (803) 743-9985

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Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month Day Year: 08 23 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: DAVID WINTER — Signature: David Winter — Month Day Year: 08 23 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
239191

a. 48320 lbs. c. lbs.
b. lbs. d. lbs.

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

Printed/Typed Name: G Anderson — Signature: Gail Anderson — Month Day Year: 08 23 99

South Carolina Departm nt of H alth and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No.: SC017002256 0 | Manifest Document No.: 137 35

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone: 803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	State Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	0008
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

a. PW-01348-1102
b.
c.
d.

Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
TRAILER # 400
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
AL 843 (803) 743-9985 D.H.

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GENERATOR

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Printed/Typed Name: Gary L Crawford | Signature: Gary L Crawford | Month 08 Day 23 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Don Houston | Signature: Don Houston | Month 08 Day 23 Year 99

18. Transporter 2 Acknowledgement of Receipt of Materials

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

FACILITY

Discrepancy Indication Space

a. 42440 lbs. c. lbs.
b. lbs. d. lbs.

239190

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

Printed/Typed Name: Ron Justice | Signature: Ron Justice | Month | Day | Year

South Carolina D partment of Health and Environm ntal Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

1345

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter) Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 — Manifest Document No. 173736 — 2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone HM 843 (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.
6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name
8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pin wood, South Carolina 29125
10. U.S. EPA ID Number: SCD070375985

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (1 ad)	001	DT	30	Y
b.				
c.				
d.				

D008

a. PW-01848-1102
b.
c.
d.

15. Special Handling Instructions and Additional Information
TRAILER # 401
WO#
24 hour emergency contact: Rick Nielson or Gary Crawford
HM 843 (803) 743-9985

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Printed/Typed Name: Gary L Crawford — Signature: Gary L Crawford — Month Day Year: 08 23 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Hubert Muckelvaney — Signature: Hubert Muckelvaney — Month Day Year: 08 23 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
239192
a. 48000 lbs. c. lbs.
b. lbs. d. lbs.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: H Anderson — Signature — Month Day Year: 08 23 99

South Carolina Department of Health and Environmental Control

14:44 (38)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. S C 0 1 7 0 0 2 2 5 6 0 — Manifest Document No. 3737

2. Page 1 of 1

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

GENERATOR

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: O H D 0 6 8 9 1 3 4 0 9

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: S C D 0 7 0 3 7 5 9 8 5

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	0 0 1	D T	3 0	Y	0 0 0 8
b.					
c.					
d.					

a. P W - 0 1 3 4 8 - 1 1 0 2
b. ___ - ___ - ___
c. ___ - ___ - ___
d. ___ - ___ - ___

15. Special Handling Instructions and Additional Information
TRAILER # 445

WO# _____

24 hour emergency contact: Neil Nielson or Gary Crawford
(803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: GARY L CRAWFORD — Signature: Gary L Crawford — Month Day Year: 08 23 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HAROLD JACKSON — Signature: Harold Jackson — Month Day Year: 08 23 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

Discrepancy Indication Space
238193

a. 44860 lbs. c. ___ lbs.
b. ___ lbs. d. ___ lbs.

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: D Anderson — Signature — Month Day Year: 08 23 99

M580

9235 HH07

South Carolina Department of Health and Environmental Control

7:40

(14)

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 896-4000
Emergency & Holidays: (803) 253-6488

PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's U.S. EPA ID No. SC017002256 Manifest Document No. 37438

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
SOUTHDIVNAVFACENGCOM, Caretaker Site Office, PO Box 190010, N. Charleston, SC 29419-9010

4. Generator's Phone (803) 743-9985

5. Transporter 1 Company Name: Wills Trucking, Inc.

6. U.S. EPA ID Number: OHD068913409

7. Transporter 2 Company Name

8. U.S. EPA ID Number

9. Designated Facility Name and Site Address
Safety-Kleen (Pinewood), Inc.
Rt 1 Box 255
Pinewood, South Carolina 29125

10. U.S. EPA ID Number: SCD070375985

State Manifest Document Number
State Generator's ID
State Transporter's ID
Transporter's Phone: 800-423-8181
State Transporter's ID
Transporter's Phone
State Facility's ID
Facility's Phone: (803) 452-5003

11. U.S. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste Number
a. RQ, Hazardous Waste Solid, N.O.S., 9, NA3077, PG III (lead)	001	DT	30	Y	D008
b.					
c.					

J. Additional Descriptions for Materials Listed Above
a. PW-01BA8-11012
b.
c.
d.

Handling Codes for Wastes Listed Above

SITE INSPECTED BY DEPT OF HEALTH & ENVIRONMENTAL CONTROL

15. Special Handling Instructions and Additional Information TRAILER 413

WO#

24 hour emergency contact: Rick Nielson or Gary Crawford (803) 743-9985

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: WF LACHICOTTE III | Signature: WF Lachicotte III | Month Day Year: 08 23 99

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Jimmy Dorr | Signature: Jimmy Dorr | Month Day Year: 08 23 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

Discrepancy Indication Space
239194

a. 43660 lbs. c. lbs.
b. lbs. d. lbs.

FACILITY

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

Printed/Typed Name | Signature | Month Day Year

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-9-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105082 **Tonnage:** 11.03

Received By: _____ **Date:** 7/8/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 1

FAXED

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 2-9-99 **Truck #** 150

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105104 **Tonnage:** 10.32

Received By: _____ **Date:** 2/9/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 2

FAXED

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-9-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105727 **Tonnage:** 10.88

Received By: _____ **Date:** 7/9/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270 - 3

FAXED

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Tony L Gentry

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-12-99 **Truck #** 176

Driver Signature: R Bennett

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105317 **Tonnage:** 14.48

Received By: [illegible] **Date:** 7/12/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 4

FAXED FOSD

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-13-99 **Truck #** 150

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105451 **Tonnage:** 15.18

Received By: _____ **Date:** 7/13/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 5

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Larry L Stutz

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-12-99 **Truck #** 158

Driver Signature: Bruce Sanb

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105333 **Tonnage:** 15.10

Received By: [illegible] **Date:** 7/12/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 6

FAXED

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-12-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105288 **Tonnage:** 13.33

Received By: _____ **Date:** 7/12/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 7

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Locati n/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Tony L Hunter

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-12-99 **Truck #** 150

Driver Signature: Bruce Jones

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105367 **Tonnage:** 11.37

Received By: N Carter **Date:** 7/12/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270 - 8

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Tony L Stuter

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-13-99 **Truck #** 176

Driver Signature: [illegible]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105495 **Tonnage:** 10.63

Received By: N Carter **Date:** 7/13/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 9

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Tony L Hutto

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-13-99 **Truck #** 150

Driver Signature: Bruce Jest

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105482 **Tonnage:** 14.88

Received By: A Carter **Date:** 7/13/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 10

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Terry L Sutter

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-13-99 **Truck #** 176

Driver Signature: J Bennett

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105465 **Tonnage:** 14.69

Received By: N Carter **Date:** 7/13/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 11

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-13-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105441 **Tonnage:** 14.73

Received By: _____ **Date:** 7/13/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 12

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Larry L Stutts

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7/13/99 **Truck #** 160

Driver Signature: Charlie Lingard

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105526 **Tonnage:** 10-8P

Received By: [illegible] **Date:** 7/13/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270 - 13

FAXED 7/16/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: K. L. Hallenbeck

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-14-99 **Truck #** 126

Driver Signature: R Bem

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105580 **Tonnage:** 14.67

Received By: [illegible] **Date:** 7/14/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 14

FA 7/16/99

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-13-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105561 **Tonnage:** 12.77

Received By: N Carter **Date:** 7/13/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270 - 15

FAX 7/14/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Gen rator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Jerry L Hutto

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 14 July 99 **Truck #** 137

Driver Signature: S. Galt

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 185605 **Tonnage:** 14.12

Received By: [illegible] **Date:** 7/14/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270 - 16

FAXED 7/16/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Jerry L. Stato

********** TO BE COMPLETED BY TRANSPORTER **********

ransp rter of Waste: FENNELL CONTAINER

Date: 7-13-99 **Truck #** 160

Driver Signature: Charlie Rizzo

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105559 **Tonnage:** 11.92

Received By: N Carter **Date:** 7/13/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 17

FAXED 7/14/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Locati n/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Larry L. Gates

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 14/7/99 **Truck #** 137

Driver Signature: S. Dalt

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105670 **Tonnage:** 10.98

Received By: [illegible] **Date:** 7/14/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 18

FAXED 7/14/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Jerry L Stutts

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-14-99 **Truck #** 176

Driver Signature: A Bennett

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105642 **Tonnage:** 10.98

Received By: N Carter **Date:** 7/14/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAX 7/16/99

EDC # 270- 19

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Larry L Gates

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-14-99 **Truck #** 176

Driver Signature: R Bennett

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105614 **Tonnage:** 13.13

Received By: [illegible] **Date:** 7/14/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 7/16/99

EDC # 270- 20

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc umt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-15-99 **Truck #** 150

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Sit : Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105720 **Tonnage:** 14.80

Received By: _____ **Date:** 7/15/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 21

FAXED 7/16/99

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Locati n/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Amy L Stuter

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 14/7/99 **Truck #** 137

Driver Signature: S. Gathers

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105650 **Tonnage:** 10.67

Received By: A Carter **Date:** 7/14/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270 - 22

F 7/16/99

WM

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransp rter of Waste: FENNELL CONTAINER

Date: 7-14-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105646 **Tonnage:** 12.34

Received By: _____ **Date:** 7/14/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 23

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a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Gen rator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Amy L Autry

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-15-99 **Truck #** 176

Driver Signature: R Bem

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105724 **Tonnage:** 6.63

Received By: [illegible] **Date:** 7/15/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 24

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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-15-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105202 **Tonnage:** 6.71

Received By: _____ **Date:** 7/15/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 25

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

ransp rter of Waste: FENNELL CONTAINER

Date: 7-16-99 **Truck #** 148

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105834 **Tonnage:** 12.32

Received By: [signature] **Date:** 7/16/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 26

FAXED 7/16/99

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Terry L. Hunter

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-16-99 **Truck #** 176

Driver Signature: R Bem

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105818 **Tonnage:** 12.01

Received By: [illegible] **Date:** 7/16/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 27

FAXED 7/16/99

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Tony L Stalter

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 14/7/99 **Truck #** 137

Driver Signature: S. Gatter

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105692 **Tonnage:** 10.45

Received By: N Carter **Date:** 7/14/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 28

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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-15-99 **Truck #** 189

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105786 **Tonnage:** 11.88

Received By: [signature] **Date:** 7/15/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 29

FAXED 7/16/99

WM

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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-15-99 **Truck #** 176

Driver Signature: R Bennett

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105752 **Tonnage:** 10.29

Received By: NCarter **Date:** 7/15/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

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EDC # 270- 30

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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

D te: 7 19 99 **Truck #** 168

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106063 **Tonnage:** 13.92

Received By: _____ **Date:** 7/19/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 7/19/99

EDC # 270- 31

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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 15/7/99 **Truck #** 137

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105783 **Tonnage:** 13.47

Received By: _____ **Date:** 7/15/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270 - 32

FAXED 7/16/99

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Locati n/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Amy L. Stuter

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

D te: 7-19-99 **Truck #** 116

Driver Signature: Elijah Pinkea

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106088 **Tonnage:** 14.05

Received By: [illegible] **Date:** 07/19/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 33

FAXED 7/19/99

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Approval # OR 9905008
Expiration 08/14/99

Gen rator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Amy L Hester

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-15-99 **Truck #** 148

Driver Signature: Elijah Pinkea

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105788 **Tonnage:** 12.17

Received By: [illegible] **Date:** 2/15/00

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 34

FAXED 2/16/00

WM

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransp rter of Waste: FENNELL CONTAINER

Date: 7-16-99 **Truck #** 157

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105656 **Tonnage:** 10.62

Received By: _____ **Date:** 7/16/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 35

FAXED 7/16/99

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Locati n/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-15-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 145789 **Tonnage:** 8.63

Received By: _____ **Date:** 7/15/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 36

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Locati n/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Tony L Hutto

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

D te: 7-16-99 **Truck #** 148

Driver Signature: Elijah Rutee

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105859 **Tonnage:** 12.20

Received By: [illegible] **Date:** 7/16/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 37

FAXED 7/16/99

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-16-99 **Truck #** 148

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105943 **Tonnage:** 13.44

Received By: [signature] **Date:** 7/16/99

FAXED 7/16/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 38

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Troy L Stanton

********** TO BE COMPLETED BY TRANSPORTER **********

.ransp rter of Waste: FENNELL CONTAINER

Date: 7-16-99 **Truck #** 148

Driver Signature: Elijah Rumlea

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105588 **Tonnage:** 10.46

Received By: [illegible] **Date:** 7/16/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 39

FAXED 7/16/99

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-20-99 **Truck #** 126

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 46288 **Tonnage:** 12.73

Received By: _____ **Date:** 7/20/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 40

FAXED 7/20/99

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransp rter of Waste: FENNELL CONTAINER

Date: 7-16-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105842 **Tonnage:** 10.16

Received By: _____ **Date:** 7/16/99

2183 HWY 78, (POB 145), DORCHESTER, SC. 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 41

FAXED 7/16/99

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-20-99 **Truck #** 156

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106278 **Tonnage:** 15.33

Received By: Carter **Date:** 7/20/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 42

FAXED 7/20/99 1:00pm

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 19/7/99 **Truck #** 137

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106082 **Tonnage:** 13.64

Received By: _____ **Date:** 07/19/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 43

FAXED 7/19/99

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: Ed Vodarski

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-19-99 **Truck #** 150

Driver Signature: Bruce Fenn

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106060 **Tonnage:** 9.54

Received By: [illegible] **Date:** 7/19/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 44

FAXED 7/19/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-19-99 **Truck #** 176

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 161638 **Tonnage:** 9.90

Received By: [signature] **Date:** 7/19/99

FAXED 7/19/99 2:45pm

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 45

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-19-99 **Truck #** 176

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106108 **Tonnage:** 9.74

Received By: M Carter **Date:** 7/19/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 46

FAXED 7/19/99 11:60

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: K. L. Hunter

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-21-99 **Truck #** 176

Driver Signature: R Bennett

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106 431 **Tonnage:** 20.06

Received By: N Carter **Date:** 7/21/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 7/21/99 12:45

EDC # 270- 47

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Locati n/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-19-99 **Truck #** 176

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 196048 **Tonnage:** 11.64

Received By: [signature] **Date:** 7/19/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 48

FAXED 7/19/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-16-99 **Truck #** 176

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105902 **Tonnage:** 12.07

Received By: [signature] **Date:** 7/16/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 7/16/99

EDC # 270- 50

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: L L Lutes

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-17-99 **Truck #** 176

Driver Signature: R Bennett

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 105931 **Tonnage:** 12.01

Received By: [illegible] **Date:** 7/19/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 51

FAXED 7/17/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-21-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106360 **Tonnage:** 11.65

Received By: _____ **Date:** 7/21/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 52

FAXED 7/21/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-21-99 **Truck #** 150

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106353 **Tonnage:** 12.51

Received By: _____ **Date:** 7/21/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 53

FAXED 7/21/99

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: L L Hunter

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-20-99 **Truck #** 156

Driver Signature: Bruce Jackson

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106251 **Tonnage:** 12.01

Received By: M Carter **Date:** 7/20/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 54

FAXED 7/20/99

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Locati n/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: S L Sutes

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-20-99 **Truck #** 176

Driver Signature: R Bennett

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106232 **Tonnage:** 14.00

Received By: [illegible] **Date:** 07/20/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 55

FAXED 7/20/99

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-20-99 **Truck #** 150

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106219 **Tonnage:** 11.97

Received By: _____ **Date:** 07/20/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 56

FAXED 7/20/99

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: L L Hutto

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7/22/99 **Truck #** 120

Driver Signature: Aaron

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106543 **Tonnage:** 8.13

Received By: M Carter **Date:** 7/22/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 57

FAXED 7/22/99

WM

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: S L Sutter

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-21-99 **Truck #** 176

Driver Signature: R Bennett

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106388 **Tonnage:** 9.41

Received By: [illegible] **Date:** 07/21/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 58

FAXED 7/21/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: S L Hunter

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 19/7/99 **Truck #** 137

Driver Signature: S. Bailey

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106156 **Tonnage:** 12.51

Received By: M Carter **Date:** 7/19/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 7/19/99 2:45

EDC # 270- 59

WM

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a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-19-99 **Truck #** 150

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106089 **Tonnage:** 11.26

Received By: _____ **Date:** 7/19/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 7/19/99

EDC # 270- 60

WM

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a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-20-99 **Truck #** 126

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106~~[illegible]~~259 **Tonnage:** 10.87

Received By: [signature] **Date:** 7/20/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 7/20/99

EDC # 270- 62

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-21-99 **Truck #** 148

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106428 **Tonnage:** 11.78

Received By: [signature] **Date:** 7/21/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270 - 63

FAXED 7/21/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

D te: 7-22-99 **Truck #** 150

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106525 **Tonnage:** 9.15

Received By: [signature] **Date:** 7/22/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 64

FAXED 7/22/99

WM

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-21-99 **Truck #** 177

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106476 **Tonnage:** 11.91

Received By: N Carter **Date:** 7/21/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 7/21/99 11:30

EDC # 270- 70

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-21-99 **Truck #** 156

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 104404 **Tonnage:** 8.58

Received By: N Carter **Date:** 7/21/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 7/21/99 12:50

EDC # 270- 71

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 2-22-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Manifest Number: 106571 **Tonnage:** 10.62

Approved By: _____ **Date:** 02/22/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 022299 9:55

EDC # 270- 72

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-21-99 **Truck #** 148

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 161384 **Tonnage:** 12.71

Received By: _____ **Date:** 7/21/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 73

FAXED 7/21/99

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-20-99 **Truck #** 126

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 1063524 **Tonnage:** 14.14

Received By: _____ **Date:** 7/20/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 74

FAXED 7/20/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-21-99 **Truck #** 150

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 101366 **Tonnage:** 10.98

Received By: _____ **Date:** 7/21/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 75

FAXED 7/21/99

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-22-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106487 **Tonnage:** 12.66

Received By: _____ **Date:** 07/22/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 76

FAXED 9/22/99

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [illegible]

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-23-99 **Truck #** 118

Driver Signature: Elijah Purnlear

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106662 **Tonnage:** 11.88

Received By: [illegible] **Date:** 7/23/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 77

FAXED

WM

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-20-99 **Truck #** 174

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106262 **Tonnage:** 12.53

Received By: _____ **Date:** 7/20/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 7/20/99 1:00pm

EDC # 270- 78

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7/22/99 **Truck #** 187

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106516 **Tonnage:** 14.06

Received By: _____ **Date:** 7/22/99

FAXED 7/22/99 9:55

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 79

WM

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-21-99 **Truck #** 148

Driver Signature: Elijah Pinckney

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 1064467 **Tonnage:** 13.57

Received By: N Carter **Date:** 7/21/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 81

FAXED 7/21/99 4:30

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-22-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106540 **Tonnage:** 13.26

Received By: _____ **Date:** 7/22/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 82

FAXED 7/22/99

WM

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-21-99 **Truck #** 126

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106480 **Tonnage:** 3.28

Received By: YCarter **Date:** 7/21/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 9/21/99 5:00

EDC # 270- 83

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7/22/99 **Truck #** 187

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106571 **Tonnage:** 10.63

Received By: N Carter **Date:** 7/22/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 7/29/99

EDC # 270- 84

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7/22/99 **Truck #** 120

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 1065568 **Tonnage:** 11.92

Received By: N Carter **Date:** 7/22/99

FAXED 7/22/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270 - 85

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7/26/99 **Truck #** 174

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106843 **Tonnage:** 12.62

Received By: G Carter **Date:** 7/26/99

DORCHESTER, SC. 29437
FAX: 843-563-4158

EDC # 270- 86

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To Tammy	From Ronnie
Co	Co. WMI
Dept.	Phone # 843-563-2607
Fax # 843-743-9413	Fax # 843-563-4158

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-23-99 **Truck #** 176

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106621 **Tonnage:** 16.5

Received By: _____ **Date:** 07/23/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED

EDC # 270- 87

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: L L Fletcher

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7/22/99 **Truck #** 120

Driver Signature: Aaron

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106655 **Tonnage:** 12.47

Received By: [illegible] **Date:** 07/22/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 38

FAXED

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: L L Hallen

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-22-99 **Truck #** 150

Driver Signature: B Jent

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106551 **Tonnage:** 10.52

Received By: M Carter **Date:** 7/22/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 89

FAXED 7/22/99

WM

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-23-99 **Truck #** 118

Driver Signature: Elijah Pinnlea

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106691 **Tonnage:** 9.53

Received By: [signature] **Date:** 7/23/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 90

FAXED

WM

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-23-99 **Truck #** 174

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106697 **Tonnage:** 10.74

Received By: _____ **Date:** 07/23/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 91

FAXED

WM

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-23-99 **Truck #** 118

Driver Signature: Elijah Pinnilea

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106720 **Tonnage:** 11.68

Received By: [signature] **Date:** 7/23/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 92

FAXED

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: L L Stutts

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-23-99 **Truck #** 176

Driver Signature: R Bennett

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106665 **Tonnage:** 15.49

Received By: [illegible] **Date:** 7/23/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED

EDC # 270- 93

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-23-99 **Truck #** 114

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106668 **Tonnage:** 10.70

Received By: _____ **Date:** 7/23/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED

EDC # 270- 94

OAKRIDGE LANDFILL
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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: S L Tuter

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-26-99 **Truck #** 176

Driver Signature: R Bem

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106795 **Tonnage:** 13.89

Received By: [illegible] **Date:** 7/26/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 95

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: L L Gulley

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-24-99 **Truck #** 176

Driver Signature: R Bennett

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106725 **Tonnage:** ~~15.801~~ 15.81

Received By: M Canton **Date:** 7/24/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 96

FAXED 7/24/99 1050

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-24-99 **Truck #** 116

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106738 **Tonnage:** 13.91

Received By: [signature] **Date:** 7/24/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 97

FAXED

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-26-99 **Truck #** 176

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106841 **Tonnage:** 6.67

Received By: [signature] **Date:** 7/26/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 98

FAXED

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: L L [illegible]

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7/26/99 **Truck #** 174

Driver Signature: James [illegible]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106817 **Tonnage:** 6.23

Received By: [illegible] **Date:** 7/26/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270 - 99

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7/26/99 **Truck #** 174

Driver Signature: James _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106853 **Tonnage:** 8.88

Received By: _____ **Date:** 7/26/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED

EDC # 270- 100

WM

OAKRIDGE LANDFILL
a WASTE MANAGEMENT COMPANY

SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: K L Hallenbeck

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-26-99 **Truck #** 118

Driver Signature: Elijah Pinnilea

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106908 **Tonnage:** 10.15

Received By: L Carter **Date:** 7/26/99

FAXED

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 102

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7/26/99 **Truck #** 260

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: ~~106922~~ 106921 **Tonnage:** 8.99

Received By: [signature] **Date:** 7/26/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 103

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: L. Sutter

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7/26/99 **Truck #** 187

Driver Signature: Mr Mickfar

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106935 **Tonnage:** 6.77

Received By: N Carter **Date:** 7/26/99

FAXED

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 104

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: K L Fuller

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7/26/99 **Truck #** 174

Driver Signature: James Fenell

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106939 **Tonnage:** 8.60

Received By: [illegible] **Date:** 7/26/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED

EDC # 270- 105

OAKRIDGE LANDFILL
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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 8-2-99 **Truck #** 188

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 107815 **Tonnage:** 10.33

Received By: [signature] **Date:** 8/2/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 106

FAXED

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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-29-99 **Truck #** 106

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 103320 **Tonnage:** 11.87

Received By: _____ **Date:** 7/29/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

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7/29/99
3:36

EDC # 270- 107

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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-26-99 **Truck #** 176

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106808 **Tonnage:** 17.09

Received By: [signature] **Date:** 7/26/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 108

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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Locati n/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: T L Stuler

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7/22/99 **Truck #** 120

Driver Signature: Aaron

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106598 **Tonnage:** 17.05

Received By: N Carter **Date:** 7/22/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 109

FAXED 7/29

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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7-23-99 **Truck #** 150

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106649 **Tonnage:** 7.54

Received By: _____ **Date:** 07/23/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 110

FAXED

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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: L L Sutter

********** TO BE COMPLETED BY TRANSPORTER ********** ***

Transporter of Waste: FENNELL CONTAINER

Date: 7-26-99 **Truck #** 118

Driver Signature: Elijah Pouloeau

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106864 **Tonnage:** 8.29

Received By: M Carter **Date:** 7/26/99

2183 HWY 78 (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

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EDC # 270- 111

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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

Transporter of Waste: FENNELL CONTAINER

Date: 7/26/99 **Truck #** 160

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106875 **Tonnage:** 7.37

Received By: [signature] **Date:** 7/26/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

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EDC # 270- 112

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Expirat 08/14/99

Generator: SUPERVISOR OF SHIPBU DING

Account Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-26-99 **Truck #** 176

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106903 **Tonnage:** 12.58

Received By: [signature] **Date:** 7/26/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

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EDC # 270- 113

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Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

L cati n/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: L L Hall

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 7-27-99 **Truck #** 176

Driver Signature: R Bell

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 106956 **Tonnage:** 9.17

Received By: [illegible] **Date:** 7/27/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED

EDC # 270- 114

WM

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: _____

********** TO BE COMPLETED BY TRANSPORTER **********

ransporter of Waste: FENNELL CONTAINER

Date: 7-28-99 **Truck #** _____

Driver Signature: _____

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 107131 **Tonnage:** 7.68

Received By: _____ **Date:** 7/28/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

FAXED 7/28/99

EDC # 270- 115

WM

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: L L Hunter

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 8-3-99 **Truck #** 126

Driver Signature: Joe Pa

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

'cket Number: 107826 **Tonnage:** 6.99

eived By: [illegible] **Date:** 8/3/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 117

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

L cation/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 8-11-99 **Truck #** 174

Driver Signature: [signature]

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 108855 **Tonnage:** 5.98

Received By: [signature] **Date:** 8/11/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 119

WM

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SPECIAL WASTE MANIFEST

Approval # OR 9905008
Expiration 08/14/99

Generator: SUPERVISOR OF SHIPBUILDING

Acc unt Number: 490-149

Location/Address: BATTERY STORAGE AREA CHARLESTON SC (10)

Tele Number: 843-740-4416 **Contact:** KAREN HALLENBECK

Generator Signature: [signature]

********** TO BE COMPLETED BY TRANSPORTER **********

.ransporter of Waste: FENNELL CONTAINER

Date: 6-30-99 **Truck #** 187

Driver Signature: Brad Muckenburg

********** TO BE COMPLETED BY OAKRIDGE LANDFILL **********

Disposal Site: Oakridge Landfill DWP 130

Description of Waste: RES / LEAD CONTAMINATED CONCRETE, ASPHALT, RR TIES

Ticket Number: 110937 **Tonnage:** 4.95

Received By: [signature] **Date:** 8/30/99

2183 HWY 78, (POB 145), DORCHESTER, SC 29437
TEL: 843-563-2607, FAX: 843-563-4158

EDC # 270- 120