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Shaw Environmental & Infrastructure, Inc.

field support services, inc.

FINAL CLOSEOUT REPORT
INTERIM REMOVAL ACTION AT
SITE 57-BUILDING 292 TCE CONTAMINATION
NAVAL SUPPORT FACILITY INDIAN HEAD
INDIAN HEAD, MARYLAND

CONTRACT NO. N62470-03-D-4402
TASK ORDER NO. 025

Prepared for:
Naval Facilities Engineering Command Washington
1314 Harwood Street, S.E.
Washington Navy Yard, DC 20374-5018

Prepared by:

Field Support Services, Inc.
6303 Ivy Lane, Suite 800
Greenbelt, Maryland 20770

and

Shaw Environmental, Inc.
500 E. Main Street, Suite 1630
Norfolk, Virginia 23510

Reviewed by:

Steve Carriere, PMP
Project Manager
Shaw Environmental, Inc.

Paul Karmazinski
Program Manager
Field Support Services, Inc.

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NOTE: ***Appendices C through E are not included as hard copies within this Closeout Report. They will be provided in electronic format only on the compact disk (CD) provided in the back of the final report.***

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List of Acronyms

ANSI	American National Standards Institute
ASTM	American Society for Testing and Materials
bgs	below ground surface
COC's	Chemicals of Concern
cis-1,2-DCE	cis-1,2-dichloroethene
COMAR	Code of Maryland Regulations
EE/CA	Engineering Evaluation/Cost Analysis
ESCP	Erosion and Sediment Control Plan
EZ	Exclusion Zone
FSAP	Field Sampling and Analysis Plan
FSSI	Field Support Services, Inc.
HASP	Health and Safety Plan
JSA	Job Safety Analysis
LANTDIV	Department of the Navy, Atlantic Division
MDE	Maryland Department of the Environment
MD DOT SHA	Maryland Department of Transportation State Highway Administration
mg/kg	milligram per kilogram
MSDS	Material Safety Data Sheet
Navy	United States Department of the Navy
NSASP	Naval Support Activity South Potomac
NSF-IH	Naval Support Facility, Indian Head
OSHA	Occupational Safety and Health Administration
pH	potential of Hydrogen
PPE	Personal Protective Equipment
PRGs	Preliminary Remediation Goals
QC	Quality Control
RAO	Removal Action Objectives
RI	Remedial Investigation
ROICC	Resident Officer in Charge of Construction
Shaw	Shaw Environmental, Inc.
SOW	Scope of Work
SS	Site Superintendent
SSO	Site Safety Officer
SZ	Support Zone
TCE	Trichloroethene

TtNUS	Tetra Tech NUS, Inc.
ug/kg	microgram per kilogram
USEPA	United States Environmental Protection Agency
VOCs	Volatile Organic Compounds

1.0 INTRODUCTION

The Field Support Services, Inc. and Shaw Environmental, Inc. (FSSI/Shaw) team was tasked to perform the interim removal action activities at Site 57 – Building 292 TCE Contamination at the Naval Support Facility, Indian Head (NSF-IH) located in Indian Head, Maryland. NSF-IH is a Naval Support Activity South Potomac (NSASP) facility within the Naval District Washington Region. FSSI/Shaw has prepared this Closeout Report in accordance with the Scope of Work (SOW) for Task Order 025 (Dated October 12, 2005) under the Department of Navy, Atlantic Division (LANTDIV) Contract Number N62470-03-D-4402.

1.1 PURPOSE

The removal action objectives (RAOs) at Site 57 were to:

- Prevent exposure to soil contaminated at exposure concentrations greater than the Preliminary Remediation Goals (PRGs).
- Prevent or minimize further migration of contaminants from soil to groundwater.

PRGs were developed for arsenic based on protection of human health and for cis-1,2-DCE and TCE based on protection of groundwater. The residential PRG for arsenic was 22.5 mg/kg. The soil PRGs for cis-1,2-DCE and TCE were 200 microgram per kilogram (ug/kg) and 28 ug/kg, respectively.

The following appendices are included as hard copies:

- Appendix A – Construction Photographic Documentation
- Appendix B – Waste Disposal Documentation

The following appendices are included in electronic format only on CD for this final report:

- Appendix C – Analytical Reports
- Appendix D – Health and Safety Documentation
- Appendix E – Quality Control Documentation

Appendix A contains representative progress photographs for the project. Appendix B contains the transportation and disposal documents of waste materials and debris disposed off-site. Appendix C contains the analytical data from the project including summary table reports, confirmation sampling results, and final reports for both waste characterization and decontamination water. Appendix D consists of health and safety documentation including inspection forms, job safety analyses (JSA's), sign in/out logs, safety meeting logs, safety permits, and work approvals. Appendix E consists of quality control documentation including the Environmental Conditions Report (ECR), submittals, bi-weekly QC meeting minutes, daily QC/production reports, soil deposit tickets, monitoring well abandonment documentation, pre-final/final inspection punchlists, and the BOD letter.

1.2 SITE BACKGROUND

Site 57, Building 292 TCE Contamination Area, encompasses the area located south of Building 292 on the Main Area of the NSF-IH (Figure 2). Previous operations involved the use of trichloroethene (TCE) for degreasing and general cleaning. During the 1970s and 1980s, spent TCE was transferred from a tank inside Building 292 into drums via a pipe that passed through the wall near the southern corner of the building. The drums were reportedly stored on a grass covered area near manhole MH-1. It is believed that these operations have resulted in the contamination of soil and groundwater. The use of TCE at Building 292 ceased in 1989.

A Remedial Investigation (RI) identified volatile organic compounds (VOCs) in soil and groundwater. Arsenic was detected in surface and subsurface soil samples to a depth of 5 feet below ground surface (bgs) at concentrations ranging from 2.4 to 79.9 milligram per kilogram (mg/kg). A baseline human health risk assessment was developed in the RI report. Unacceptable risks were identified for future construction workers exposed to soil and for hypothetical future residents exposed to soil and groundwater. Chemicals of Concern (COCs) were based on protection of human health, protection of the environment, and/or exceedances of regulatory standards. The only soil COC based on protection of human health was arsenic. Soil COCs based on protection of groundwater were cis-1,2-dichloroethene (cis-1,2-DCE) and TCE.

The United States Department of the Navy (Navy), in concurrence with the United States Environmental Protection Agency (USEPA) and the Maryland Department of the Environment (MDE), agreed to perform soil removal due to potential human health risks from arsenic in soil and protection of groundwater from cis-1,2-DCE and TCE. The Navy, with support from the USEPA and the MDE, agreed that a soil removal action based on appropriate Preliminary Remediation Goals (PRGs) would reduce the level of potential human health risk at the site to acceptable levels.

An Engineering Evaluation/Cost Analysis (EE/CA) was completed to develop and evaluate potential removal action alternatives to address remediation of soil contaminated with cis-1,2-DCE, TCE and arsenic. Alternative 1 was the no action alternative and Alternative 2 included the excavation and offsite disposal of the contaminated soil. The EE/CA concluded that Alternative 2 provided the best balance of trade-offs based on the evaluation criteria. Established PRGs were used to determine the areas within Site 57 that required cleanup action.

1.3 PROJECT OBJECTIVES

The primary objectives of this task order were as follows:

- Prevent exposure to soil contaminated at exposure concentrations greater than PRGs.
- Prevent or minimize further migration of contaminants from soil to groundwater.

During construction activities photographs were taken to document that the above mentioned objectives were being met and performed as described in the approved site Work Plan. A collection of these photographs is located in Appendix A.

1.4 PRE-CONSTRUCTION SUBMITTALS AND PLANS

In preparation for mobilization to the site, FSSI/Shaw prepared the following documents for review and approval by the Navy:

- Work Plan
- Project Schedule (Appendix A of the Work Plan)
- Erosion and Sediment Control Plan (Appendix B of the Work Plan)
- Site Specific Health and Safety Plan (Appendix C of the Work Plan)
- Quality Control Plan (Appendix D of the Work Plan)
- Field Sampling and Analysis Plan (Appendix E of the Work Plan)

2.0 DESCRIPTION OF ACTIVITIES

2.1 SITE PREPARATION

Site preparation involved the preparatory work to begin the remediation at the site. This included:

- Mobilization of personnel and resources
- Site layout and photographic documentation
- Utility search
- Decontamination/material storage pad construction
- Erosion and sediment control installation

2.1.1 Mobilization

FSSI/Shaw mobilized personnel and equipment to the site on May 30, 2006. Personnel and equipment were utilized from Shaw's resource facilities located in Windsor, New Jersey and Tidewater, Virginia and through FSSI's Greenbelt, Maryland office. Additional rental equipment and material resources were obtained from local vendors. A complete list of personnel and equipment on-site can be found in the Daily Contractor Production Reports located in Appendix E. The main project office for the work at the site was located within the construction trailer area adjacent to Building 892.

2.1.2 Site layout and photographic documentation

During site setup, FSSI/Shaw established survey control in the work area using existing survey control points (IH1152 & IH1225). Information regarding the existing survey control points was provided by the Navy. FSSI/Shaw staked out the proposed limits of excavation. High-visibility safety fence was installed around the three excavation areas prior to initiating excavation activities. FSSI/Shaw photographed the site prior to the start of any significant ground-disturbing activities and the documentation is presented in the Environmental Conditions Report which is included in the QC Documentation (Appendix E). Additional photographs were taken during the implementation of all tasks to document construction operations. These photos are included in Appendix A with a description of the activities being performed.

2.1.3 Utility Search

Prior to beginning any intrusive activities, FSSI/Shaw subcontracted an independent utility locator (Dave Roberts) to confirm/identify the locations of underground utilities at the site. Also, Miss Utility was contacted for additional information on any underground utilities. Miss Utility had no utilities located within the area of disturbance and all other underground lines were marked by the independent locator.

2.1.4 Decontamination/Material Storage Pad Construction

A decontamination pad and material storage pad were also constructed prior to the removal of soil. The decontamination pad was constructed of wooden timbers and visqueen and was used as a decontamination area for all construction equipment that may have come in contact with the contaminated soil.

The material storage pad consisted of a 2-foot tall sand berm lined with polyethylene. A layer of geofabric was also placed in the inside of the pad as added protection to reduce the risk of cross contamination by ripping or cutting of the poly. The final material storage pad dimensions were approximately 40' x 80' with a 2' tall soil berm.

2.1.5 Erosion and Sediment Control

All erosion and sediment controls complied with the manufacturer's installation specifications, the 1994 Standards and Specifications for Soil Erosion and Sediment Control, MDE requirements, and the ESCP. All erosion and sediment control features were installed under the direction of the Site Supervisor, inspected and approved by the Water Management Administration (WMA) and will remain in-place until approval is received from the ROICC and one full growing season has occurred.

Erosion and sediment control features installed at the site included silt fence, straw bales, a stabilized construction entrance, and temporary diversion berms. Silt fence was strategically placed around the perimeter of each excavation location in areas where erosion and sediment accumulation was possible. Straw bales were placed on impervious surfaces where silt fence was inapplicable (Area A). A stabilized construction entrance, comprised of a stone pad underlain with filter fabric, was installed at the entrance of Area B. This entrance helped in reducing the amount of soil transported onto the paved parking area by construction equipment. Temporary diversion berms were also used during this project. Temporary soil diversion berms were used just north of Area B and around the material storage handling pad to divert storm water around the excavation and excavated soils pile. Sand bags were used around the perimeter of Areas A & C to act as temporary diversion berms. Again, this was done to prevent the excavations from filling with excess storm water. All diversion berms were installed only on an as-needed basis and were approved by WMA prior to any excavation activities.

2.2 CONTAMINATED MATERIAL EXCAVATION AND HANDLING

The excavation of contaminated materials occurred at three locations within Site 57. The actually footprints of the excavation areas are shown in Figure 2. The large area near Building 292 (Area A) was approximately 1,695 square feet and was excavated to a depth of 8 feet below ground surface (bgs). During the excavation of Area A utility pipes were encountered, including a previously damaged section of approximately 25 feet of Terra Cotta piping. FSSI/Shaw removed the damaged sections of the Terra Cotta pipe and replaced it with 25 feet of corrugated metal piping.

The small area near Building 292 (Area B) was approximately 225 square feet and was excavated to a depth of 7.5 feet bgs before groundwater was encountered. Utilities were also

encountered in Area B and were dug around to prevent any damages. These utilities consisted of three water lines located approximately 4.5 feet bgs. FSSI/Shaw installed a valve cover over a waterline valve in this area indicating the location of these pipes.

The area south of Building 292 (Area C) was approximately 125 square feet and was excavated to a depth of 8 feet bgs. An additional two feet of excavation along the south wall of Area C was required based on confirmation sample results. The final estimated volume of contaminated soil removed from Site 57 was 1,005 tons (see Appendix B).

Hand excavation was performed around all underground utilities. Also, when using a hydraulic excavator hand probing was performed in the areas prior to removing soil. The excavated material was transferred into a loader bucket and transported to the material storage pad. The stockpiled material was sampled in accordance with the FSAP and disposed off-base at an approved disposal facility.

Six monitoring wells were disturbed during excavation activities, these included MW03/MW04, MW07/MW08, MW24 (flush mount), and MW25 (flush mount). The monitoring wells disturbed within the excavation areas were abandoned by an approved driller and removed during excavation activities (Appendix E). Any remaining portions of the monitoring wells below the excavation limits were abandoned in accordance with the Code of Maryland Regulations (COMAR), 26.04.04.11 Abandonment Standards.

2.3 CONFIRMATION SOIL SAMPLING

Following excavation to the limits and depth specified above, confirmation sampling was performed by TtNUS to ensure the overall remediation goals had been achieved. The composite sampling that was carried out consisted of dividing the excavation floors into quadrants with one grab location randomly located within each of the quadrants. The excavation sidewalls were divided vertically into four sections, each section was then further divided into four quadrants. One composite sample was collected from each of the four wall sections. The composite samples consisted of soil obtained from four grab locations randomly located within each of the wall sections four quadrants.

Discrete samples were collected at a rate of two discrete samples from each excavation floor and four discrete samples from the excavation sidewalls in each excavation. Floor areas were divided in half and sidewalls were divided into four sections. One discrete sample was then randomly collected from each section.

After the preliminary excavation of Area C, confirmation samples indicated hot spots of arsenic still present along the south excavation wall. It was decided that an additional two feet of soil was to be excavated from the area in an attempt to remove the arsenic hot spots. After additional excavation, re-confirmation sampling occurred and, although arsenic traces were still present in the results, it was determined that the overall PRGs for the site had been obtained and no further excavation was required. All confirmation results can be found in Appendix C

2.4 CHARACTERIZATION AND ANALYSIS

FSSI/Shaw performed waste characterization sampling and analysis for proper soil and water disposal. Waste characterization sampling consisted of one sample per 500 cubic yards of waste soil. Waste characterization sampling of all excavated soils and decontamination water was performed by FSSI/Shaw. The results of this sampling can be found in Appendix C.

2.5 TRANSPORTATION AND DISPOSAL OF WASTE

The contaminated material stockpiled within the material storage pad was disposed of at an offsite disposal facility based on the results of the waste characterization sampling. Waste characterization sampling indicated the soils to contain enough TCE contamination to consider the soil a Hazardous Waste. FSSI/Shaw subcontracted the transportation and disposal of the contaminated material. For this particular project all hazardous waste soil was transported to Wayne Disposal, Inc. located in Belleville, MI. A facility permit was obtained (see Appendix E) from the receiving disposal facility verifying the facility was approved to and would accept the contaminated material. Additional non-hazardous construction debris was transported to the Farm Services, Inc. facility in Accokeek, MD. Copies of the waste manifests were kept on site with the generator and transporter signatures and dates until the original waste manifests were received from the disposal facility. The original waste manifests were received from the disposal facility along with a document verifying that the contaminated materials were accepted by the disposal facility. The original waste manifests will be given to the Navy and copies of the original waste manifests are included in this Closeout Report (Appendix B).

2.6 SITE RESTORATION

Site restoration activities included placement of backfill, topsoil, and asphalt within the excavated areas. In addition, the areas covered by topsoil were seeded, fertilized and mulched.

2.6.1 Backfill placement

Once approval had been obtained from the ROICC, FSSI/Shaw began backfilling the excavations. Backfill material was obtained from Stinnets Gravel and was not required to be sampled since this backfill was taken from the same approved location that was used on a previous project (previous results can be found in Appendix E). A signed letter that was obtained from Ed Stinnet stating that the material was from a native borrow source that was not known to be hazardous and the soil being provided for Site 57 was of the same source as the soil provided on a previous project which had already been sampled and approved is located in Appendix E. Previous sample results were also used to determine the maximum dry density for compaction testing.

The backfill material was placed with a skid steer loader in 8-inch loose lifts and compacted with a plate compactor. The backfill was compacted to a minimum of 90 percent of the maximum dry density based on ASTM Method D1557 (Modified Proctor). FSSI/Shaw subcontracted Bob Taylor Engineering to perform density testing using a Troxler Nuclear Moisture/Density Gauge, as determined necessary by the Navy. A total of 54 compaction tests were taken throughout the

course of the backfilling operations, all with greater than the specified 90% compaction. The results of these compaction tests are located in Appendix E.

2.6.2 Topsoil placement

Topsoil was obtained from an offsite borrow source and was chemically analyzed for its conformance to the clean fill requirements in accordance with the FSAP prior to its use onsite. A letter was obtained from the borrow source stating that the material is a native borrow source and/or the material is not known to be hazardous (see Appendix E). Material used as topsoil was also tested for organic matter, potential of Hydrogen (pH) and soluble salts (these test results can be found in Appendix E).

A CAT 320 excavator was utilized to roughen the surface of the backfill material prior to placement of the topsoil. The topsoil was placed in one 6-inch thick lift with the CAT 320 excavator and a skid steer loader. The compaction of this layer was incidental to the placement of the soil and tracking of the equipment. The topsoil layer was not spread or placed when the underlying fill was excessively wet. All irregularities in the finished surface were corrected to eliminate depressions prior to seeding. The topsoil was placed and spread to restore the site to the existing pre-construction grades (see Figure 3).

2.6.3 Seeding, fertilizing, and mulching

Upon completion of the soil placement activities, all disturbed areas were fine graded and seeded. FSSI/Shaw performed the seeding, fertilizing and mulching activities. A mixture of grass seed, including Tall Fescue, Weeping Lovegrass, and Serecia Lespedeza were applied to the site. An appropriate 10-20-20 fertilizer mixture was also applied to the seed bed. The seeding mixture was based upon the following ratios as specified in the E&S Section of the Final Work Plan: 110 lbs/acre for Tall Fescue, 3 lbs/acre for Weeping Lovegrass, and 20 lbs/acre for the Serecia Lespedeza.

2.6.4 Asphalt cover installation

A total area of approximately 5,500 square feet required an asphalt cover due to excavation limits and incurred damages from equipment (Figure 2). Sub-base preparation for the asphalt cover consisted of a layer of crusher run aggregate CR-6. FSSI/Shaw subcontracted the installation of the asphalt. The subcontractor installed two layers of asphalt. A 4-inch layer of bituminous concrete binder (base) course was placed on top of the CR-6 sub-base, followed by a 2-inch layer of bituminous concrete wearing (surface) course. A tack coat was applied to existing bituminous surfaces and the vertical cut surfaces of an existing pavement section to ensure bonding between the surfaces being paved and the new bituminous concrete material. All asphalt areas that were damaged by site construction equipment were cleared of the broken asphalt debris and repaired in the same manner. All newly paved areas can be seen on Figure 2.

3.0 HEALTH AND SAFETY

FSSI/Shaw demands a safe, healthy and accident-free workplace, and ensures that the workplace is maintained in accordance with all regulations, policies and standards. FSSI/Shaw adopts responsible proactive programs to provide appropriate protective measures where specific regulations relating to health and safety do not exist.

3.1 DELINEATION OF WORK ZONES

To prevent migration of contamination caused by personnel or equipment, work areas and personal protective equipment (PPE) were clearly specified prior to beginning operations. FSSI/Shaw designated work areas or zones as suggested by the National Institute of Occupational Safety and Health/Occupational Safety and Health Administration/United States Coast Guard/EPA's document, titled "Occupational Safety and Health Guidance Manual for Hazardous Waste Site Activities." All work areas were also marked off with high visibility fence to restrict access. Each work area was divided into the following two zones:

- An Exclusion or "Hot" Zone (EZ)
- A Support Zone (SZ)

3.1.1 Exclusion Zone

The EZ was the area suspected of contamination, and it presented the greatest potential for worker exposure. Personnel entering the area had to wear the mandated level of protection for that area. The EZs for this project were the excavation area, temporary stockpile area, and areas designated as work in progress. EZ areas were marked using a combination of fencing, natural barriers and caution tape. The level of contaminant at these sites did not require more than Level D protection.

3.1.2 Support Zone

The SZ served as a clean, control area. Operational support facilities were located within the SZ. Normal work clothing and support equipment were appropriate in this zone. Contaminated equipment or clothing was not allowed in the SZ.

3.1.3 Site Access

Vehicular access to the site was controlled at all times. Signs were posted and high visibility fencing was installed around the perimeter of the excavation areas. A log of all personnel visiting, entering or working on the site was maintained. This log recorded the date, name, company or agency and the time entering or exiting the site. Copies of health and safety documentation, including the daily sign in log, are presented in Appendix D.

3.1.4 General

The following items were requirements to protect the health and safety of workers and were discussed in the safety orientation given to all employees or visitors prior to initiating work on the site:

• Eating, drinking, chewing gum or tobacco, smoking or any practice that increases the probability of hand to mouth transfer and ingestion of contamination was prohibited in the EZ.
• Hands and face must be washed upon leaving the EZ and before eating, drinking, chewing gum or tobacco and smoking or other activities that may have resulted in ingestion of contamination.
• A buddy system was used. Hand signals were established to maintain communication.
• During site operations, each worker considered himself/herself as a safety backup to their partner. All personnel were aware of dangerous situations that could have developed. Job Safety Analyses (JSAs) were used to make tasks more understandable and safer. All employees involved with the task had direct input to the task's JSA (Appendix D).
• Visual contact was maintained between buddies on-site when performing hazardous duties.
• No FSSI/Shaw workers were admitted to the site without the proper safety equipment, training and medical surveillance certification.
• All personnel on-site were required to comply with established safety procedures.
• Proper decontamination procedures were followed prior to leaving the site.
• FSSI/Shaw employees were required to sign in and out of the site.

3.2 DECONTAMINATION PROCEDURES

This section describes the procedures FSSI/Shaw used to ensure that both personnel and equipment were free from contamination when they left the work site. The primary levels of protection used at the project areas were Level D and Level D+.

3.2.1 Level D and D+

Level D consisted of the following PPE:

• American National Standards Institute (ANSI) safety glasses with permanent side shields,
• ANSI-approved hard hat,
• ANSI steel-toed work boots, and
• Work clothing as prescribed by the day's weather,
• ANSI safety glasses with permanent side shields,
• Face shield (when splashes or projectiles pose a hazard),
• Kleenguards/Tyveks when working in grassy areas to avoid tick bites & poisonous plants (all joints were taped with duct tape),
• Nitrile gloves over sample gloves, and
• Nitrile/latex over boots

3.2.2 Personal Hygiene

Before any eating, smoking or drinking, personnel washed hands, arms, neck and face.

3.2.3 Equipment Decontamination

All equipment that came into contact with suspected site contamination was decontaminated before leaving the site. Decontamination procedures involved sweeping, wiping, scraping, and spraying the exterior of the equipment. Personnel performing this task wore the proper PPE as recommended by the SSO.

3.2.4 Disposal

All decontamination liquids and disposable clothing were treated as contaminated waste, unless determined otherwise by accepted testing methods. Disposable clothing for the Site 57 activities included sampling gloves. These items were bagged and disposed of with the contaminated soil that was removed from the site during excavation activities.

3.3 HEALTH AND SAFETY PERFORMANCE

FSSI/Shaw incorporated many safety programs into effect to ensure the safety of its personnel. Some of the safety programs used are discussed in the following sections.

3.3.1 Daily Safety Meetings

Each morning prior to the start of work on site, a safety meeting was held. Topics for this meeting were FSSI/Shaw safety policies; JSA reviews emergency escape routes, proper PPE for the day's tasks and work to be performed during the day. The daily logs and sign-in sheets for these meetings are included in Appendix D**.**

3.3.2 Orientation Program

All new employees, subcontractors and visitors to this site that were performing work activities within the exclusion zone were required to complete a job-specific orientation program. Along with reading and signing the Health and Safety Plan (HASP), this orientation program explained the tasks FSSI/Shaw was performing on site. Site history, scope of work, site contaminants and Material Safety Data Sheets (MSDSs) were discussed. Emergency escape routes were also explained at this meeting. Daily work areas and the level of PPE needed to enter theses areas were discussed.

3.3.3 Job Safety Analysis Program

All FSSI/Shaw task participants assist in the preparation of JSAs. Correct steps for performing a task are listed in a JSA. JSAs also list the potential hazards and how to ensure the safe and uncomplicated completion of the task at hand. Each major task performed for this project was preceded by a JSA.

3.3.4 Safety Observer Program

This program takes an individual and requires him/her to step back from his/her task and look around his/her surroundings to help spot potential unsafe situations. Each day employees would

report the previous day's findings at the morning safety meeting. This way, the information was given to all employees for future use.

3.3.5 Accidents and Injuries

The work at Site 57 was completed without any injuries to FSSI/Shaw personnel, subcontractors or visitors at the site. During the 2,725 man-hours on-site there were no OSHA recordable, lost time, first aid, or near miss accidents reported.

4.0 QUALITY CONTROL SUMMARY REPORT

This section discusses the quality controls, inspections, and testing that were performed during the removal actions at Site 57, Areas A, B, and C at NSF-IH. Supporting quality control documents are included in Appendix E**.** Photographic documentation of work performed at Site 57 is included in Appendix A**.**

4.1 PROJECT QUALITY CONTROL PROGRAM

The purpose of the Quality Control (QC) program for this project was to ensure compliance with the contract specifications and drawings to the satisfaction of the Navy. The Site Superintendent (SS) and Site QC Manager were responsible for the management and implementation of the Program QC Plan and the delivery order specific QC Plan for both on- and off-site activities. The on-site QC function for the removal action at Sites 57 was divided into the following two categories:

- Management and Administration
- Inspection and Testing Field System Audits

4.2 MANAGEMENT AND ADMINISTRATION

The Program QC Plan describes the quality system used to satisfy Quality Control of the Department of the Navy Contract No. N62470-03-D-4402. Management and administration of the Program QC Plan are discussed in this section. The initial Submittal Register contained in the site QC Plan was reviewed and approved of by NAVFACWASH. The Submittal Register continued to be reviewed, at a minimum, on a monthly basis and revised as necessary. All contractor and government-approved submittals, including vendor drawings, test results, samples, certificates of compliance and catalog data were reviewed by the Site QC Manager for specification compliance and forwarded to the ROICC (see Appendix E). Preparatory meetings were conducted by the Site QC Manager prior to each definable feature of work. These meetings with the Site Supervisor, site foreman and subcontractors, if applicable, included:

- Review of the contract specifications and contract drawings,
- Verification that submittals for materials and equipment were approved,
- Verification of testing requirements,
- Discussion of construction methods, and
- Review of the safety requirements for the various tasks.

The Site QC Manager observed the initial phase of each definable feature of work to ensure compliance with the contract specifications and drawings. Follow-up inspections were performed on a daily basis until the completion of each definable feature of work. These inspections were documented in the daily Contractor QC Report (Appendix E). Modifications to contract specifications and drawings required Navy approval in the form of a Variance Request prior to installation. One Variance Request was generated over the course of the project for the abandonment of the 6 monitoring wells (see Appendix E).

Work that did not comply with the contract, and could not be corrected the same day, was identified on the Rework Items List. The daily Contractor QC Reports were submitted to the ROICC. For this project, there were no work activities requiring listing on the re-work form.

4.3 ENVIRONMENTAL CONDITIONS REPORT

FSSI/Shaw photographed the site prior to the start of any significant ground-disturbing activities and the documentation is presented in the Environmental Conditions Report which is included in the QC Documentation (Appendix E).

4.4 INSPECTION AND TESTING

4.4.1 Waste Removal/Excavation

The waste removal/excavation operations were directed and monitored by the QC Manager and Site Superintendent to ensure compliance with the Work Plan. Confirmation sampling and analysis performed to ensure the overall remediation goals were met in compliance with the regulatory requirements (Appendix C).

4.4.2 Waste Transportation and Disposal

The waste from the excavations was staged in the material handling pad as it was excavated. See waste disposal documents in Appendix B. Sampling and disposal characteristic analyses were performed to determine the proper transportation and disposal requirements (see Appendix C). The staging operation and the sampling were monitored by the QC Manager and Site Superintendent to ensure compliance with the Work Plan.

4.4.3 Site Restoration

Restoration activities, including excavation backfill, compacting, grading, and seeding were monitored by the QC Manager and Site Superintendent to ensure compliance with the work plan.

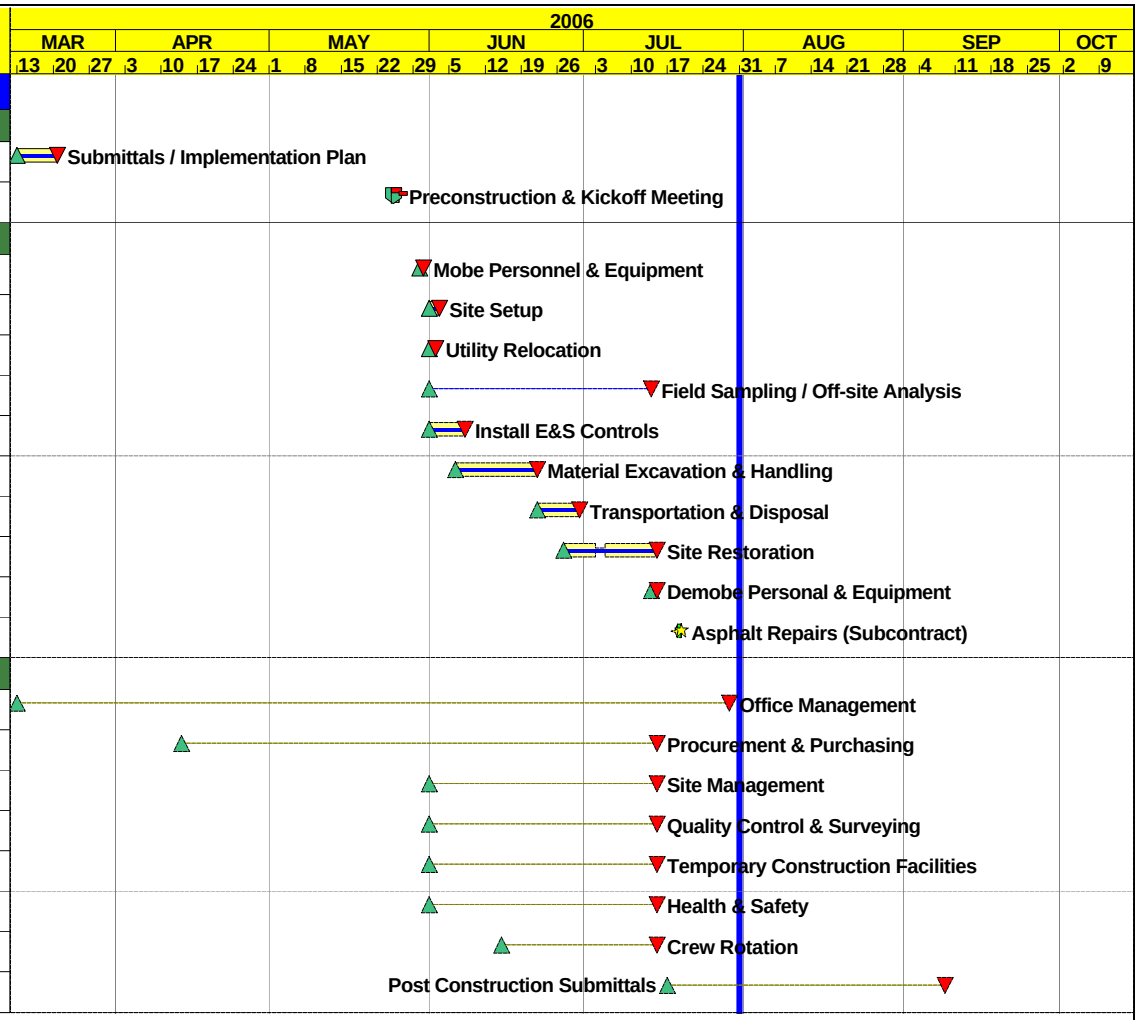
4.5 QUALITY CONTROL MEETINGS

Two QC meetings were conducted throughout the course of this project. These meetings took place bi-weekly beginning on June 7, 2006 and concluding on June 21, 2006. Invitees included the representatives from NAVFACWASH, the office of the ROICC, and NSF-IH as well as FSSI/Shaw personnel. Topics discussed included a review of project status, upcoming project schedule, and rework items. The minutes from these two meetings are included in Appendix E.

Prior to the completion of work at the site, two walkthrough inspections were conducted. The site pre-final walkthrough inspection occurred on May 6, 2006 with representative attendees from NAVFACWASH, NSF-IH, FSSI, and Shaw E&I. The final walkthrough inspection took place on May 24, 2006 with representative attendees from NAVFACWASH, NSF-IH, FSSI, and Shaw E&I. Both the pre-final and final walkthrough punch-lists can be found in Appendix E.

FIGURES

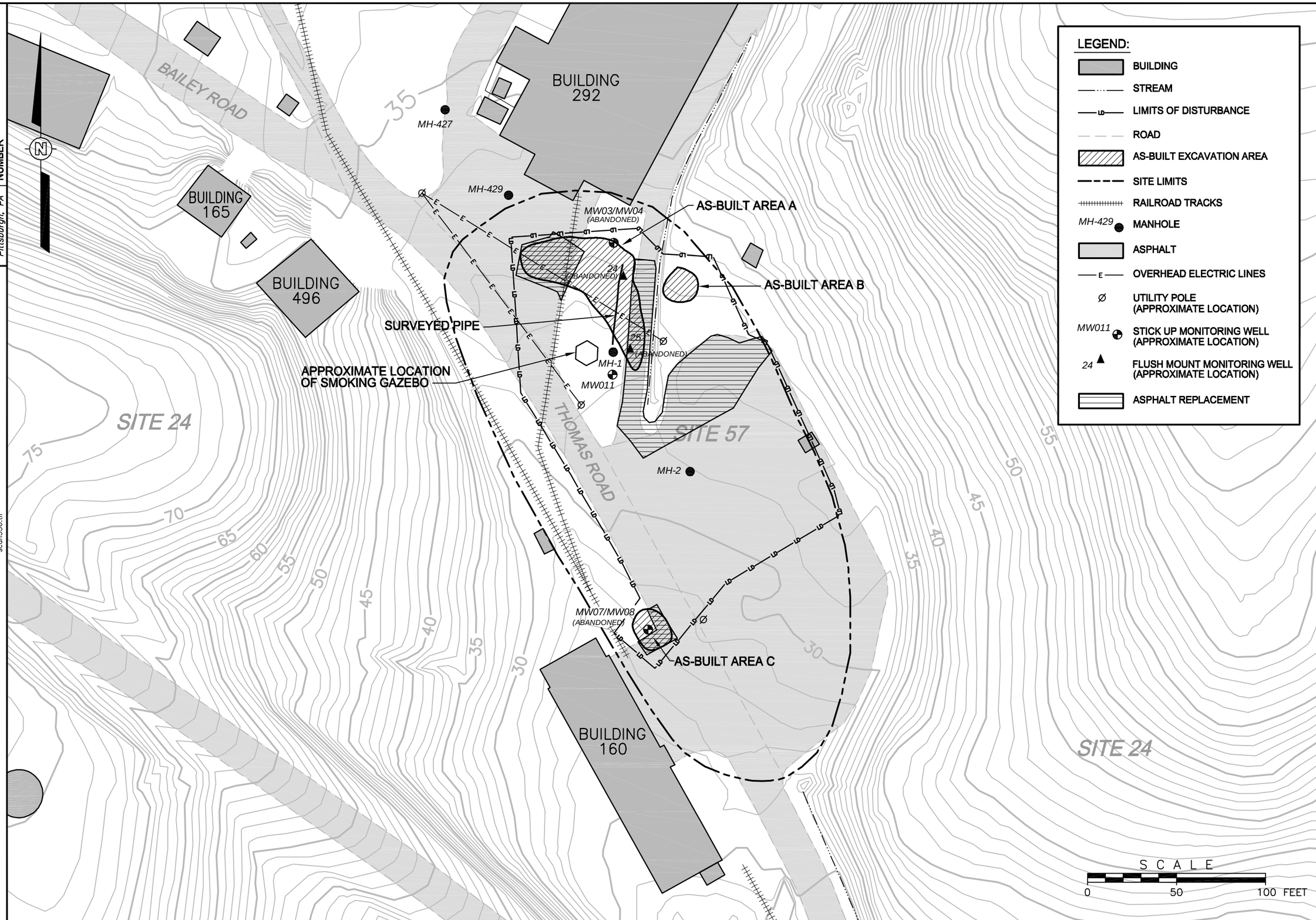
Activity ID	Activity Description	Orig Dur	%	Early Start	Early Finish
FSSI 25 - SITE 57 INDIAN HEAD - MD					
Preconstruction Activities					
01003000	Submittals / Implementation Plan	6	100	13MAR06A	20MAR06A
01000010	Preconstruction & Kickoff Meeting	1	100	25MAY06A	25MAY06A
Field Activities					
01002000	Mobe Personnel & Equipment	1	100	30MAY06A	30MAY06A
01004000	Site Setup	2	100	01JUN06A	02JUN06A
03001000	Utility Relocation	1	100	01JUN06A	01JUN06A
03004000	Field Sampling / Off-site Analysis	15	100	01JUN06A	13JUL06A
05007000	Install E&S Controls	3	100	01JUN06A	07JUN06A
08001000	Material Excavation & Handling	10	100	06JUN06A	21JUN06A
19020010	Transportation & Disposal	5	100	22JUN06A	29JUN06A
20004000	Site Restoration	13	100	27JUN06A	14JUL06A
21005000	Demobe Personal & Equipment	1	100	14JUL06A	14JUL06A
20000200	Asphalt Repairs (Subcontract)	1*	100	19JUL06A	19JUL06A
Management & Administrative Activities					
99003000	Office Management	81	100	13MAR06A	28JUL06A
99005000	Procurement & Purchasing	9	100	14APR06A	14JUL06A
99001000	Site Management	41	100	01JUN06A	14JUL06A
99004000	Quality Control & Surveying	9	100	01JUN06A	14JUL06A
99008000	Temporary Construction Facilities	42	100	01JUN06A	14JUL06A
99015000	Health & Safety	9	100	01JUN06A	14JUL06A
21005500	Crew Rotation	9	100	15JUN06A	14JUL06A
21006000	Post Construction Submittals	29*	100	17JUL06A	08SEP06A



Start Date	13MAR06	F25F	Sheet 1 of 1
Finish Date	29SEP06	FSSI	
Data Date	31JUL06	FSSI 25 - SITE 57 INDIAN HEAD - MD	
		Classic Schedule Layout	

Date	Revision	Checked	Approved

© Primavera Systems, Inc.



REV	DATE	BY	CHK'D	APR'VD	DESCRIPTION/ISSUE
0	5/22/06	GSJ	PMG	PSV	FINAL WORK PLAN ISSUED TO NAVY

REVISIONS

Shaw® Shaw Environmental, Inc.

DESIGNED BY	Lin Liu	3/16/06	CHECKED BY P. Gamble 3/21/06
DRAWN BY	G. Jones	3/16/06	APPROVED BY S. Carriere 3/21/06

NAVFAC Naval Facilities Engineering Command NAVFAC WASHINGTON

NAVAL SUPPORT FACILITY, INDIAN HEAD INDIAN HEAD, MARYLAND
SITE 57 – CLOSEOUT REPORT
AS-BUILT SITE LAYOUT

SCALE: AS SHOWN
SIZE: B
DELIVERY ORDER NO. 025
CONSTR. CONTRACT NO. N62470-03-D-4402
NAVFAC DRAWING NO. --
SHEET I.D. FIGURE 2

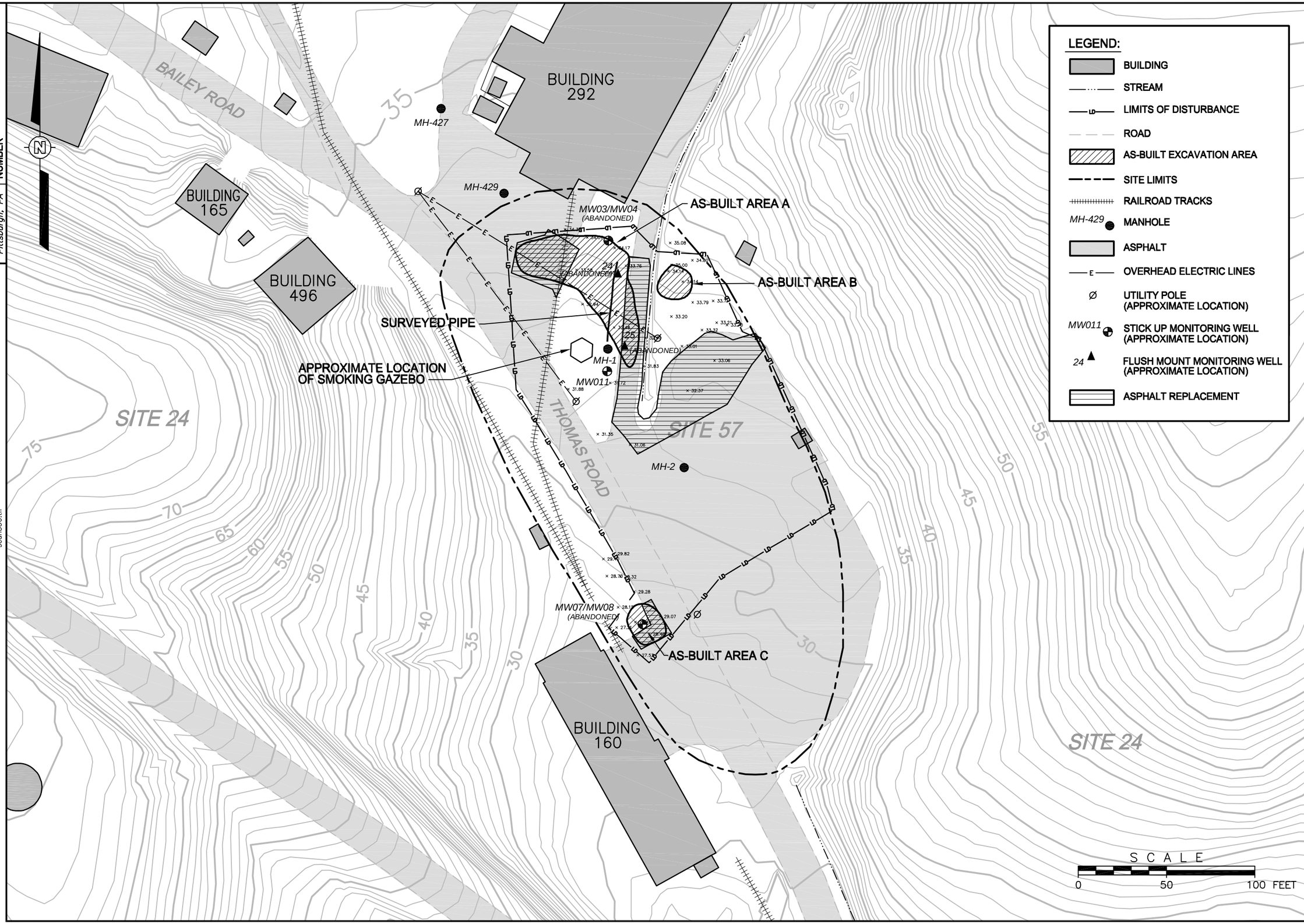
OFFICE Pittsburgh, PA
DRAWING NUMBER 120359-B8

Xref:
Image: NAVFAC Logo.jpg scan536.tif

File: O:\CAD Standards\Shaw\Formats\Shaw Layouts-draft-ps.dwg
Plot Date/Time: Oct 03, 2006 – 10:43am
Plotted By: greg.jones

OFFICE Pittsburgh, PA

DRAWING NUMBER 120359-B10



LEGEND:

- BUILDING
- STREAM
- LIMITS OF DISTURBANCE
- ROAD
- AS-BUILT EXCAVATION AREA
- SITE LIMITS
- RAILROAD TRACKS
- MH-429 MANHOLE
- ASPHALT
- OVERHEAD ELECTRIC LINES
- UTILITY POLE (APPROXIMATE LOCATION)
- MW011 STICK UP MONITORING WELL (APPROXIMATE LOCATION)
- 24 FLUSH MOUNT MONITORING WELL (APPROXIMATE LOCATION)
- ASPHALT REPLACEMENT

REVISIONS

0	5/22/06	GSJ	PMG	PSV	FINAL WORK PLAN ISSUED TO NAVY
REV	DATE	BY	CHK'D	APR'VD	DESCRIPTION/ISSUE

Shaw Environmental, Inc.

DESIGNED BY	Lin Liu	3/16/06	CHECKED BY	P. Gamble 3/21/06
DRAWN BY	G. Jones	3/16/06	APPROVED BY	S. Carriere 3/21/06

NAVFAC Naval Facilities Engineering Command WASHINGTON

NAVAL SUPPORT FACILITY, INDIAN HEAD INDIAN HEAD, MARYLAND

SITE 57 – CLOSEOUT REPORT

AS-BUILT ELEVATIONS

SCALE: AS SHOWN	SIZE: B
DELIVERY ORDER NO. 025	
CONSTR. CONTRACT NO. N62470-03-D-4402	
NAVFAC DRAWING NO. --	
SHEET I.D. FIGURE 3	

Xref:
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scan536.tif

File: O:\CAD Standards\Shaw\Formats\Shaw Layouts-draft-ps.dwg
Plot Date/Time: Oct 04, 2006 – 1:11pm
Plotted By: greg.jones

Appendix A
Construction Photographic Documentation

APPENDIX A

CONSTRUCTION PHOTOGRAPIC DOCUMENTATION
INTERIM REMOVAL ACTION AT
SITE 57-BUILDING 292 TCE CONTAMINATION
NAVAL SUPPORT FACILITY INDIAN HEAD
INDIAN HEAD, MARYLAND
CONTRACT NO. N62470-03-D-4402
TASK ORDER NO. 025

Prepared for:
Naval Facilities Engineering Command Washington
1314 Harwood Street, S.E.
Washington Navy Yard, DC 20374-5018

Prepared by:

Field Support Services, Inc.
6303 Ivy Lane, Suite 800
Greenbelt, Maryland 20770

and

Shaw Environmental, Inc.
500 E. Main Street, Suite 1630
Norfolk, Virginia 23510

September 2006
Project No. 120359

Area A

Preconstruction Site Overview

Sediment Control and High Visibility Fencing

Piping Encountered During Excavation

Backfill and Stone Placement with Temporary Pipe Replacement

Corrugated Pipe Repair Installation

Backfill and Compaction

Asphalt Repair and Seeding

Area B

Preconstruction Site Overview

Sediment and Erosion Control with High Visibility Fencing

Stabilized Site Construction Entrance

Water Lines Encountered

Backfill and Compaction

Site Seeded and Vegetated

Area C

Preconstruction Site Overview

Looking South, Monitoring Wells 7 & 8 with Silt Fencing (pre-excavation)

Excavation Site with Traffic Blockages

Asphalt Cut for Additional Digging Due to Arsenic Hot Spots

Site with Asphalt Repair and Seeding

Additional Photo Documentation

Lined Material Storage Pad

Material Storage Pad Berm Installation

T&D from Material Storage and Handling Pad

Equipment Decontamination

Section of Culvert Repair

Driveway Asphalt Repair

Handling Pad Asphalt Repair

Area B Asphalt Repair

Appendix B
Waste Disposal Documentation

APPENDIX B

WASTE DISPOSAL DOCUMENTATION
INTERIM REMOVAL ACTION AT
SITE 57-BUILDING 292 TCE CONTAMINATION
NAVAL SUPPORT FACILITY INDIAN HEAD
INDIAN HEAD, MARYLAND
CONTRACT NO. N62470-03-D-4402
TASK ORDER NO. 025

Prepared for:
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September 2006
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Approval: 062306WCF
Receipt Status: All
Trans Mode (Inbound/Outbound): Both
Bulk Mode (Bulk/Non-Bulk): Both

Receipt List

Wayne Disposal, Inc.

1 Wayne Disposal, Inc.

Receipt ID	Manifest/BOL / Commingled	Customer	Generator	Waste Stream	Approval / Product TSDF Approval	Waste Code	Bill Unit	Quantity	Rec.Status	Fpr. Status / Outbound	Date
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1141755-2	MI10280026	050009 EQIS NORTH CAROLINA			062306WCF	TRAN	LOAD	22	Accepted	Accepted	6/29/2006
1141759-2	MI10280031	050009 EQIS NORTH CAROLINA			062306WCF	TRAN	LOAD	23.97	Accepted	Accepted	6/29/2006
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1141684-1	MI10280014	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTON	062306WCF	F002	TONS	24.82	Accepted	Accepted	6/28/2006
1141686-1	MI10280007	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTON	062306WCF	F002	TONS	21.11	Accepted	Accepted	6/28/2006

Approval: 062306WCF
Receipt Status: All
Trans Mode (Inbound/Outbound): Both
Bulk Mode (Bulk/Non-Bulk): Both

Receipt List

Wayne Disposal, Inc.

1 Wayne Disposal, Inc.

Receipt ID	Manifest/BOL / Commingled	Customer	Generator	Waste Stream	Approval / Product TSDF Approval	Waste Code	Bill Unit	Quantity	Rec.Status	Fpr. Status / Outbound	Date
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1141694-1	MI10280013	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	20.06	Accepted	Accepted	6/28/2006
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1141755-1	MI10280026	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	20.79	Accepted	Accepted	6/29/2006
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1141798-1	MI10280037	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	19.79	Accepted	Accepted	6/30/2006
1141799-1	MI10280036	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	21.18	Accepted	Accepted	6/30/2006
1141800-1	MI10280034	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	24.22	Accepted	Accepted	6/30/2006
1141801-1	MI10280035	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	20.59	Accepted	Accepted	6/30/2006
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1141804-1	MI10280045	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	21.34	Accepted	Accepted	6/30/2006
1141808-1	MI10280044	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	23.9	Accepted	Accepted	6/30/2006
1141812-1	MI10280042	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	20	Accepted	Accepted	6/30/2006
1141813-1	MI10280046	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	16.05	Accepted	Accepted	6/30/2006
1141831-1	MI10280033	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	24.72	Accepted	Accepted	6/30/2006
1141892-1	MI10280038	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	16.99	Accepted	Accepted	7/5/2006
1141936-1	MI10280041	050009 EQIS NORTH CAROLINA	MD4170024109	NAVAL DISTRICT WASHINGTOI	062306WCF	F002	TONS	18.9	Accepted	Accepted	7/6/2006

Approval: 062306WCF
Receipt Status: All
Trans Mode (Inbound/Outbound): Both
Bulk Mode (Bulk/Non-Bulk): Both

Receipt List

Wayne Disposal, Inc.

1 Wayne Disposal, Inc.

Receipt ID	Manifest/BOL / Commingled	Customer	Generator	Waste Stream	Approval / Product TSDF Approval	Waste Code	Bill Unit	Quantity	Rec.Status	Fpr. Status / Outbound	Date
1141937-1	MI10280040	050009 EQIS NORTH CAROLINA	MD4170024109 NAVAL DISTRICT WASHINGTON		062306WCF	F002	TONS	19.78	Accepted	Accepted	7/6/2006
					Total quantity for bill unit TONS:			**1005.05**			

THE ENVIRONMENTAL QUALITY COMPANY ®

Generator Approval Notification

June 27, 2006

Customer: EQIS NORTH CAROLINA
Fax: (919) 363-4713

SHAWN A JORGENSEN
NAVAL DISTRICT WASHINGTON - INDIAN HEAD
HN2SJ, B289
101 STRAUSS AVENUE
INDIAN HEAD, MD 20640-5035

This Generator Approval Notification acknowledges the acceptability of waste material(s) into the EQ environmental protection facility identified below and ensures that this facility has the appropriate permit(s) issued by federal and state regulatory agencies to properly transport, treat, and/or dispose of the waste material(s).

EQ FACILITY: Wayne Disposal, Inc. (MID048090633)
49350 North I-94 Service Drive, Belleville, Michigan 48111

Approval Number: 062306WCF

Generator EPA ID: MD4170024109 **Expires On:** 6/22/2007
Waste Common Name: TCE Soil
Comments: 1100 tons 1 x only. Must meet treatment standards. No free liquids or biodegradable sorbents.
Primary Waste Code: F002

The Approval(s) listed above are based upon characterization information supplied to EQ by the Customer and the generator (if other than the Customer). The Customer is ultimately responsible for the accuracy and completeness of all such information, whether provided by the Customer or the generator. The Customer must notify the EQ Resource Team immediately upon knowledge of any changes to this information. This Approval and all wastes which are transported, delivered, or tendered to EQ under this Approval shall be subject to the attached Standard Terms and Conditions.

The Approval(s) will expire on the date(s) noted. Any new Approvals obtained from EQ on future business will be valid for a period of one (1) year from the date of issuance. Within 60 days of the Approval Expiration Date, you will be notified of the requirements for recertification.

SURCHARGE EXEMPTION CERTIFICATION

Please check one:

☐ **Michigan Disposal Waste Treatment Plant**
49350 North I-94 Service Drive
Belleville, MI 48111
Phone: (800) 592-5489
Fax: (800) 592-5329

☐ **EQ Detroit, Inc.**
1923 Frederick Street
Detroit, MI 48211
Phone: (313) 923-0080
Fax: (313) 923-3375

☒ **Wayne Disposal, Inc., Site #2 Landfill**
49350 North I-94 Service Drive
Belleville, MI 48111
Phone: (800) 592-5489
Fax: (800) 592-5329

This is a certification, pursuant to 324.11108 of Act 451 of 1994 (the Hazardous Waste Management Act) that the hazardous waste identified herein is exempt from the surcharge provided in the Act.

Waste Code(s): F002

Waste Description: Soil

Quantity and Units: 1,100 tons

Manifest Number: Multiple

EQ Approval Number: 062306WCF

This shipment is exempt from the surcharge because the waste is:

☐ Ash that results from the incineration of hazardous waste or the incinerations of solid waste as defined in part 115.

☐ Hazardous waste exempted by rule because of its character or the treatment it has received.

☒ Hazardous waste that is removed from a site of environmental contamination that is included in a list submitted to the legislature pursuant to section 20105, or hazardous waste that is removed as part of a site cleanup activity at the expense of the state [*Michigan*] or federal government.

☐ Solidified hazardous waste produced by a solidification facility licensed pursuant to section 11123 and destined for land disposal.

☐ Hazardous waste generated pursuant to a 1-time closure or site cleanup activity in this state if the closure or cleanup activity has been authorized in writing by the department. Hazardous waste resulting from the cleanup of inadvertent releases which occur after March 30, 1988 is not exempt from the fee.

☐ Primary and secondary wastewater treatment solids from a wastewater treatment plant that includes an aggressive biological treatment facility as defined in section 3005(j)(12)(B) of subtitle C of the solid waste disposal act, title II of Public Law 89-272, 42 U.S.C. 6925.

☐ Emission control dust or sludge from the primary production of steel in electric furnaces.

Generator Signature Mark B Yeaton Company Name Naval Support Facility Indian Head

Printed Name MARK B. YEATON Date 6/26/2006

WASTE CHARACTERIZATION REPORT

Tracking #

☐ *I authorize EQ – The Environmental Quality Company to choose the appropriate facility and method of waste management from the technologies offered at the EQ facilities identified below.*

☒ **Michigan Disposal Waste Treatment Plant** (Stabilization and Treatment)	49350 N. I-94 Service Drive, Belleville, MI 48111 Phone: 800-592-5489 Fax: 800-592-5329	EPA ID # MID 000 724 831
☐ **Wayne Disposal, Inc. Site #2 Landfill** (Hazardous & PCB Waste Landfill)	49350 N. I-94 Service Drive, Belleville, MI 48111 Phone: 800-592-5489 Fax: 800-592-5329	EPA ID # MID 048 090 633
☐ **EQ Detroit, Inc.** (Stabilization, Wastewater Treatment)	1923 Frederick Street, Detroit, MI 48211 Phone: (313) 923-0080 Fax: 313-923-3375	EPA ID # MID 980 991 566
☐ **EQ Resource Recovery, Inc.** (Solvent Recycling, Fuel Blending, WW Treatment)	36345 Van Born Road, Romulus, MI 48174 Phone: 866-373-8357 Fax: 734-326-4033	EPA ID # MID 060 975 844
☐ **EQ North Carolina** (Stabilization, Treatment, Labpack Decommissioning)	1005 Investment Blvd, Apex, NC 27502 Phone: 919-363-4700 Fax: 919-363-4714	EPA ID # NCD 982 170 292
☐ **EQ Florida, Inc.** (Drum Consolidation, Labpack Decommissioning)	7202 East 8th Ave, Tampa, FL 33619 Phone: 813-623-5463 Fax: 813-628-0842	EPA ID # FLD 981 932 494
☐ **EQ Transfer & Processing** (Drum Transfer/Universal Waste Handling)	2000 Ferry Street, Detroit, MI 48211 Phone: 313-923-0080 Fax: 313-922-8419	EPA ID # MIK 939 928 313
☐ **EQ Indianapolis** (Drum Transfer/Non-Hazardous Waste Processing)	4000 West 10th Street, Indianapolis, IN 46222 Phone: 317-247-7160 Fax: 317-247-7170	EPA ID # IND 161 049 309
☐ **EQ Atlanta** (Drum Transfer/Non-Hazardous Waste Processing)	5600 Fulton Industrial Blvd SW, Atlanta, GA 30336 Phone: 404-494-3520 Fax: 404-494-3560	EPA ID # GAR 000 039 776
☐ **EQ Augusta, Inc.** (Wastewater Treatment)	3920 Goshen Industrial Blvd, Augusta, GA 30906 Phone: 706-771-9100 Fax: 706-771-9124	EPA ID # GAR 000 011 817

Waste Common Name: TCE Contaminated Soil

Section 1 – Generator & Customer Information

SIC/NAICS*

Generator EPA ID # MD4170024109

Generator Naval Support Facility, Indian Head

Facility Address Code HN2WSJ, Bldg. 289, 101 Strauss St.

City Indian Head State MD Zip 20640

County

Mailing Address Same

City State Zip

Generator Contact Shawn Jorggensen

Title

Phone 301-744-2263 Fax

*For a list of NAICS codes, please refer to Section 9 of the EQ Resource Guide.

Internal Use Only: EQ Division

EQ Customer No. 6231

Invoicing Company EarthCare Solutions, Inc.

Address 9826 Dominion Forest Circle

City Fredericksburg State VA Zip 22408

Country

Invoicing Contact Don Mangan

Phone 540-898-7633 Fax 540-898-7639

Technical Contact Same

Phone Fax

Mobile Pager

E-mail

Section 2 – Shipping & Packaging Information

2.1) Shipping Volume & Frequency 1100 tons

☒ One Time Only ☐ Year ☐ Quarter ☐ Month

2.2) DOT Shipping Name RQ, Haxardous Waste Solid, N.O.S.

2.3) Is this waste surcharge exempt? ☐ Yes ☒ No

If yes, please attach a surcharge exemption form, found in Section 2 of the EQ Resource Guide.

2.4) Packaging **(check all that apply)**

☒ Bulk Solid ($Yd^3 < 2000$ lbs/yd^3)

☐ Bulk Solid (Ton >2000 lbs/yd^3)

☐ Bulk Liquids (Gallon)

☐ Totes, Size

☐ Cubic Yard Boxes/Bags

☐ Drums, Size

☐ Other (palletized, 5 gal. Pail, etc.)

Quoted bulk disposal charges for solid materials will be billed by the cubic yard, if the waste density is less than 2,000lbs./cubic yard. If waste density is greater than 2,000 lbs./cubic yard, then bulk disposal charges will be billed by the ton, regardless of the approved container.

Section 3 – Physical Characteristics

3.1) Color Brown 3.2) Odor Slight

3.3) Does this waste contain any "Potentially Odorous Constituents" as defined in the EQ Resource Guide? (Section 3) ☐ Yes ☒ No

3.4) Physical State at 70°F: ☒ Solid ☐ Dust/Powder ☐ Liquid ☐ Sludge

3.5) What is the pH of this waste? ☐ ≤2 ☐ 2.1-4.9 ☒ 5-10 ☐ 10.1-12.4 ☐ ≥12.5

3.6) What is the flash point of this waste? ☐ <90°F ☐ 90-140°F ☐ 140-199°F ☒ >200°F

3.7) Does this waste contain? **(check all that apply)** ☒ **None** ☐ Free Liquids ☐ Oily Residue ☐ Metal Fines

☐ Biodegradable Sorbants ☐ Amines ☐ Ammonia ☐ Water Reactive ☐ Biohazard ☐ Aluminum

☐ Shock Sensitive Waste ☐ Reactive Waste ☐ Radioactive Waste ☐ Explosives ☐ Pyrophoric Waste ☐ Isocyanates

☐ Asbestos – non-friable ☐ Asbestos – friable ☐ Dioxins ☐ Furans

Section 4 – Waste Composition and Generating Process

4.1) Describe the physical composition of the waste (i.e., soil, water, PPE, debris, key chemical compounds, etc.)

Soil 100 to 100 % to %

to % to %

Total: 100%

4.2) Provide a *detailed* description of the process generating this waste (attach flow diagram if available).
cleaning of tools inside BLD 292. Runoff of cleaning solvent into soil.

Section 5 – Is This Hazardous Waste?

Please refer to Section 5 of the EQ Resource Guide for a list of waste codes

As determined by 40 CFR, Part 261 and State Rules: **Please list applicable waste code(s):**

5.1) Is this an EPA RCRA listed hazardous waste (F, K, P or U)? ☐ Yes ☒ No

5.2) Is this an EPA RCRA characteristic hazardous waste (D001-D043)? ☒ Yes ☐ No D040

5.3) Do any State Hazardous Waste Codes apply? ☐ Yes ☒ No

5.4) Is this waste intended for wastewater treatment? ☐ Yes* ☒ No

If you answered 'no' to 5.1, 5.2, and 5.3, please skip to Section 7. *If you answered 'yes' to 5.4, please attach the Waste Characterization Report Addendum found in Section 7 of the EQ Resource Guide.

Section 6 – Hazardous Wastes

6.1) Does this waste exceed Land Disposal Restriction levels? ☒ Yes ☐ No

6.1a) If this waste stream is greater than 50% soil, does it meet the alternative soil treatment standards of 40 CFR 268.49? ☒ Yes ☐ No

6.1b) Does this waste contain greater than 50% debris, by volume? (Debris is greater than 2.5 inches in size.) ☒ Yes ☐ No

6.2) Is the waste an oxidizer (D001)? ☐ Yes ☒ No

6.3) Does this waste contain reactive cyanide ≥ 250 ppm (D003)? ☐ Yes ☒ No

6.4) Does this waste contain reactive sulfide ≥ 500 ppm (D003)? ☐ Yes ☒ No

6.5) Please indicate which constituent concentrations are below or above the regulatory level. Please indicate the basis used in the determination. Either "Below" or "Above" **MUST** be checked for each constituent.

Based On: ☐ **Generator Knowledge** ☒ **Analysis*** ☐ **MSDS***

***Please attach a copy. Analysis or MSDS are required for EQFL Non-hazardous wastes.**

Code		Regulatory Level TCLP (mg/l)	Concentration (if above)	Code		Regulatory Level TCLP (mg/l)	Concentration (if above)
D004	Arsenic	5	☒ Below ☐ Above	D024	m-Cresol	200	☒ Below ☐ Above
D005	Barium	100	☒ Below ☐ Above	D025	p-Cresol	200	☒ Below ☐ Above
D006	Cadmium	1	☒ Below ☐ Above	D026	Cresols	200	☒ Below ☐ Above
D007	Chromium	5	☒ Below ☐ Above	D027	1,4-Dichlorobenzene	7.5	☒ Below ☐ Above
D008	Lead	5	☒ Below ☐ Above	D028	1,2-Dicholoroethane	0.5	☒ Below ☐ Above
D009	Mercury	0.2	☒ Below ☐ Above	D029	1,1-Dichloroethylene	0.7	☒ Below ☐ Above
D010	Selenium	1	☒ Below ☐ Above	D030	2,4-Dinitrotoluene	0.13	☒ Below ☐ Above
D011	Silver	5	☒ Below ☐ Above	D031	Heptachlor	0.008	☒ Below ☐ Above
D012	Endrin	0.02	☒ Below ☐ Above	D032	Hexachlorobenzene	0.13	☒ Below ☐ Above
D013	Lindane	0.4	☒ Below ☐ Above	D033	Hexachlorobutadiene	0.5	☒ Below ☐ Above
D014	Methoxychlor	10	☒ Below ☐ Above	D034	Hexachloroethane	3.0	☒ Below ☐ Above
D015	Toxaphene	0.5	☒ Below ☐ Above	D035	Methyl Ethyl Ketone	200	☒ Below ☐ Above
D016	2,4-D	10	☒ Below ☐ Above	D036	Nitrobenzene	2	☒ Below ☐ Above
D017	2,4,5-TP (Silvex)	1	☒ Below ☐ Above	D037	Pentachlorophenol	100	☒ Below ☐ Above
D018	Benzene	0.5	☒ Below ☐ Above	D038	Pyridine	5	☒ Below ☐ Above
D019	Carbon Tetrachloride	0.5	☒ Below ☐ Above	D039	Tetrachloroethylene	0.7	☒ Below ☐ Above
D020	Chlordane	0.03	☒ Below ☐ Above	D040	Trichloroethylene	0.5	☐ Below ☒ Above
D021	Chlorobenzene	100	☒ Below ☐ Above	D041	2,4,5-Trichlorophenol	400	☒ Below ☐ Above
D022	Chloroform	6.0	☒ Below ☐ Above	D042	2,4,6-Trichlorophenol	2	☒ Below ☐ Above
D023	o-Cresol	200	☒ Below ☐ Above	D043	Vinyl Chloride	0.2	☒ Below ☐ Above

6.6) If this is a characteristic hazardous waste, does it contain underlying hazardous constituents? ☐ Yes ☒ No
If yes, please list the constituents in Section 11.

Section 7 – Non-Hazardous Wastes

For a complete list of non-hazardous waste codes, please refer to Section 7 of the EQ Resource Guide

Please list applicable waste code:

7.1) Is this a Michigan non-hazardous liquid industrial waste? ☐ Yes ☒ No
7.2) Is this a Universal waste? ☐ Yes ☒ No
7.3) Is this a Recyclable Commodity? (e.g.: computer monitors, free mercury, etc.) ☐ Yes ☒ No
7.4) Is this waste a recoverable petroleum product? ☐ Yes* ☒ No
7.5) Is this waste used oil as defined by 40 CFR Part 279? ☐ Yes* ☒ No

If you answered 'yes' to questions 7.4 or 7.5 please attach the Waste Characterization Report Addendum found in Section 7 of the EQ Resource Guide.

Section 8 – TSCA Information

8.1) What is the concentration of PCBs in the waste? ☒ None ☐ 0-5 ppm ☐ 6-49 ppm ☐ 50-499 ppm ☐ 500+ ppm
8.2) Does the waste contain PCB contamination from a source with a concentration ≥ 50 ppm? ☐ Yes ☒ No
If you answered "no" to 8.1 and 8.2, please skip to Section 9.
8.3) Has this waste been processed into a non-liquid form? ☐ Yes ☐ No
If yes, what was the concentration of PCBs prior to processing? ☐ N/A ☐ 0-499 ppm ☐ 500+ ppm
8.4) Is the non-liquid PCB waste in the form of soil, rags, debris, or other contaminated media? ☐ Yes ☐ No
8.5) Are you a PCB capacitor manufacturer or a PCB equipment manufacturer? ☐ Yes ☐ No
8.6) Has the PCB Article (e.g., transformer, hydraulic machine, PCB-contaminated electrical equipment) been drained/flushed of all PCBs and decontaminated in accordance with 40 CFR 761.60(b)? ☐ N/A ☐ Yes ☐ No

Section 9 – Clean Air Act Information

NESHAP SIC*		
2812	2836	2875
2813	2841	2879
2816	2842	2891
2819	2843	2892
2821	2844	2893
2822	2851	2895
2823	2861	2899
2824	2865	2911
2833	2869	3312
2834	2873	4953
2835	2874	9511

9.1) Is this waste subject to regulation under 40 CFR, Part 63, Subpart DD or 40 CFR, Part 264, Subpart CC (RCRA)? ☐ Yes ☐ No
(Does the waste contain >500 ppm Volatile Organic Hazardous Air Pollutants – VOHAP's or Volatile Organic Compounds – VOC's?)
For a complete list of VOHAP's, please see Section 11 of the EQ Resource Guide
9.2) Is the site, or waste, subject to any other MACT or NESHAP? ☐ Yes, please specify: _____ ☐ No
9.3) Does this waste stream contain Benzene? ☐ Yes ☐ No
If you answered "no" to 9.3, please skip to Section 10.
9.4) Does the waste stream come from a facility with one of the SIC/NAICS codes listed under the Benzene NESHAP identified in 40 CFR 61, Subpart FF? ☐ Yes ☐ No
9.5) Is the generating source of this waste stream a facility with Total Annual Benzene (TAB) ≥10 Mg/year? ☐ Yes ☐ No
For assistance in calculating the TAB, please see the TAB Worksheet in Section 9 of the EQ Resource Guide.
If you answered "no" to question 9.4 and 9.5, please skip to Section 10.
9.6) Does the waste contain >10% water? ☐ Yes ☐ No
9.7) What is the TAB quantity for your facility? _____ Mg/Year
9.8) Does the waste contain >1.0 mg/kg total Benzene? ☐ Yes ☐ No
9.9) What is the total Benzene concentration in your waste? _____ Percent or _____ ppmw.

(Supporting analysis must be attached. Do not use TCLP analytical results. Acceptable laboratory methods include 8020, 8240, 8260, 602 and 624.)

*For a list of NAICS codes, please refer to Section 9 of the EQ Resource Guide.

Section 10 – Fuel Blending Information

10.1) Is this waste intended for fuel blending? ☐ Yes* ☒ No
*If yes, Heat value (BTU/lb.) Chlorine (%) Water (%) Solids (%)
10.2) Is this waste intended for reclamation? ☐ Yes ☐ No (5-Gallon Sample required for all reclaim waste streams)

Section 11 – Constituent Information

Please identify your waste constituents from these four categories: ***Underlying Hazardous Constituents (UHC's), Volatile Organic Hazardous Air Pollutants (VOHAP's), Volatile Organic Compounds (VOC's) and Toxic Release Inventory Constituents (TRI)***

Constituent	Concentration	UHC?	Constituent	Concentration	UHC?
	☐ Yes ☒ No			☐ Yes ☒ No	
	☐ Yes ☒ No			☐ Yes ☒ No	
	☐ Yes ☒ No			☐ Yes ☒ No	
	☐ Yes ☒ No			☐ Yes ☒ No	
	☐ Yes ☒ No			☐ Yes ☒ No	

Please see Section 11 of the EQ Resource Guide for a list of UHC's, VOHAP's and VOC's. For a complete list of TRI constituents, please refer to 40 CFR 372.65.

Section 12 – Certification

I certify that all information (including attachments) is complete and factual and is an accurate representation of the known and suspected hazards, pertaining to the waste described herein. I authorize EQ's Resource Team to add supplemental information to the waste approval file, provided I am contacted and give verbal permission. I authorize EQ's Resource Team to obtain a sample from any waste shipment for purposes of verification and confirmation. I agree that, if EQ approves the waste described herein, all such wastes that are transported, delivered, or tendered to EQ by Generator or on Generator's behalf shall be subject to, and Generator shall be bound by, the attached Standard Terms and Conditions.

Generator Signature Mark B Yeaton Printed Name MARK B. YEATON
NAVAL SUPPORT FACILITY INDIAN HEAD, ENVIR ENGR 6/23/2006
Company Title Date

The generator's signature MUST appear on the EQ Waste Characterization Report. If the generator has authorized a third party to certify this document, a written notice (on generator letterhead) must accompany this submittal. Although the EQ Resource Team is authorized to make certain modifications to the information provided on this form, the addition or removal of waste codes and waste constituents must be documented by the generator.

WASTE CHARACTERIZATION REPORT

Tracking # 8

☐ *I authorize EQ – The Environmental Quality Company to choose the appropriate facility and method of waste management from the technologies offered at the EQ facilities identified below.*

☒ **Michigan Disposal Waste Treatment Plant** (Stabilization and Treatment)	49350 N. I-94 Service Drive, Belleville, MI 48111 Phone: 800-592-5489 Fax: 800-592-5329	EPA ID # MID 000 724 831
☐ **Wayne Disposal, Inc. Site #2 Landfill** (Hazardous & PCB Waste Landfill)	49350 N. I-94 Service Drive, Belleville, MI 48111 Phone: 800-592-5489 Fax: 800-592-5329	EPA ID # MID 048 090 633
☐ **EQ Detroit, Inc.** (Stabilization, Wastewater Treatment)	1923 Frederick Street, Detroit, MI 48211 Phone: (313) 923-0080 Fax: 313-923-3375	EPA ID # MID 980 991 566
☐ **EQ Resource Recovery, Inc.** (Solvent Recycling, Fuel Blending, WW Treatment)	36345 Van Born Road, Romulus, MI 48174 Phone: 866-373-8357 Fax: 734-326-4033	EPA ID # MID 060 975 844
☐ **EQ North Carolina** (Stabilization, Treatment, Labpack Decommissioning)	1005 Investment Blvd, Apex, NC 27502 Phone: 919-363-4700 Fax: 919-363-4714	EPA ID # NCD 982 170 292
☐ **EQ Florida, Inc.** (Drum Consolidation, Labpack Decommissioning)	7202 East 8th Ave, Tampa, FL 33619 Phone: 813-623-5463 Fax: 813-628-0842	EPA ID # FLD 981 932 494
☐ **EQ Transfer & Processing** (Drum Transfer/Universal Waste Handling)	2000 Ferry Street, Detroit, MI 48211 Phone: 313-923-0080 Fax: 313-922-8419	EPA ID # MIK 939 928 313
☐ **EQ Indianapolis** (Drum Transfer/Non-Hazardous Waste Processing)	4000 West 10th Street, Indianapolis, IN 46222 Phone: 317-247-7160 Fax: 317-247-7170	EPA ID # IND 161 049 309
☐ **EQ Atlanta** (Drum Transfer/Non-Hazardous Waste Processing)	5600 Fulton Industrial Blvd SW, Atlanta, GA 30336 Phone: 404-494-3520 Fax: 404-494-3560	EPA ID # GAR 000 039 776
☐ **EQ Augusta, Inc.** (Wastewater Treatment)	3920 Goshen Industrial Blvd, Augusta, GA 30906 Phone: 706-771-9100 Fax: 706-771-9124	EPA ID # GAR 000 011 817

Waste Common Name: TCE Contaminated Soil

Section 1 – Generator & Customer Information

SIC/NAICS*

Generator EPA ID # MD4170024109

Generator Naval Support Facility, Indian Head

Facility Address Code HN2WSJ, Bldg. 289, 101 Strauss St.

City Indian Head State MD Zip 20640

County

Mailing Address Same

City State Zip

Generator Contact Shawn Jorggensen

Title

Phone 301-744-2263 Fax

*For a list of NAICS codes, please refer to Section 9 of the EQ Resource Guide.

Internal Use Only: EQ Division

EQ Customer No. 6231

Invoicing Company EarthCare Solutions, Inc.

Address 9826 Dominion Forest Circle

City Fredericksburg State VA Zip 22408

Country

Invoicing Contact Don Mangan

Phone 540-898-7633 Fax 540-898-7639

Technical Contact Same

Phone Fax

Mobile Pager

E-mail

Section 2 – Shipping & Packaging Information

2.1) Shipping Volume & Frequency 1100 tons

☒ One Time Only ☐ Year ☐ Quarter ☐ Month

2.2) DOT Shipping Name RQ, Haxardous Waste Solid, N.O.S.

2.3) Is this waste surcharge exempt? ☐ Yes ☒ No

If yes, please attach a surcharge exemption form, found in Section 2 of the EQ Resource Guide.

2.4) Packaging (check all that apply)

☒ Bulk Solid (Yd^3 < 2000 lbs/yd^3)

☐ Bulk Solid (Ton >2000 lbs/yd^3)

☐ Bulk Liquids (Gallon)

☐ Totes, Size

☐ Cubic Yard Boxes/Bags

☐ Drums, Size

☐ Other (palletized, 5 gal. Pail, etc.)

Quoted bulk disposal charges for solid materials will be billed by the cubic yard, if the waste density is less than 2,000lbs./cubic yard. If waste density is greater than 2,000 lbs./cubic yard, then bulk disposal charges will be billed by the ton, regardless of the approved container.

Section 3 – Physical Characteristics

3.1) Color Brown 3.2) Odor Slight

3.3) Does this waste contain any "Potentially Odorous Constituents" as defined in the EQ Resource Guide? (Section 3) ☐ Yes ☒ No

3.4) Physical State at 70°F: ☒ Solid ☐ Dust/Powder ☐ Liquid ☐ Sludge

3.5) What is the pH of this waste? ☐ ≤2 ☐ 2.1-4.9 ☒ 5-10 ☐ 10.1-12.4 ☐ ≥12.5

3.6) What is the flash point of this waste? ☐ <90°F ☐ 90-140°F ☐ 140-199°F ☒ >200°F

3.7) Does this waste contain? **(check all that apply)** ☒ **None** ☐ Free Liquids ☐ Oily Residue ☐ Metal Fines

☐ Biodegradable Sorbants ☐ Amines ☐ Ammonia ☐ Water Reactive ☐ Biohazard ☐ Aluminum

☐ Shock Sensitive Waste ☐ Reactive Waste ☐ Radioactive Waste ☐ Explosives ☐ Pyrophoric Waste ☐ Isocyanates

☐ Asbestos – non-friable ☐ Asbestos – friable ☐ Dioxins ☐ Furans

Section 4 – Waste Composition and Generating Process

4.1) Describe the physical composition of the waste (i.e., soil, water, PPE, debris, key chemical compounds, etc.)

Soil 100 to 100 % to %

to % to %

Total: 100%

4.2) Provide a *detailed* description of the process generating this waste (attach flow diagram if available).
cleaning of tools inside BLD 292. Runoff of cleaning solvent into soil.

Section 5 – Is This Hazardous Waste?

Please refer to Section 5 of the EQ Resource Guide for a list of waste codes

As determined by 40 CFR, Part 261 and State Rules: **Please list applicable waste code(s):**

5.1) Is this an EPA RCRA listed hazardous waste (F, K, P or U)? ~~☒~~ Yes ☒ No W.T.S. F002 W.T.S.

5.2) Is this an EPA RCRA characteristic hazardous waste (D001-D043)? ☒ Yes ~~☒~~ No W.T.S. ~~D040~~ W.T.S

5.3) Do any State Hazardous Waste Codes apply? ☐ Yes ☒ No

5.4) Is this waste intended for wastewater treatment? ☐ Yes* ☒ No

If you answered 'no' to 5.1, 5.2, and 5.3, please skip to Section 7. *If you answered 'yes' to 5.4, please attach the Waste Characterization Report Addendum found in Section 7 of the EQ Resource Guide.

Section 6 – Hazardous Wastes

6.1) Does this waste exceed Land Disposal Restriction levels? ☒ Yes ☐ No

6.1a) If this waste stream is greater than 50% soil, does it meet the alternative soil treatment standards of 40 CFR 268.49? ☒ Yes ☐ No

6.1b) Does this waste contain greater than 50% debris, by volume? (Debris is greater than 2.5 inches in size.) ☒ Yes ☐ No

6.2) Is the waste an oxidizer (D001)? ☐ Yes ☒ No

6.3) Does this waste contain reactive cyanide ≥ 250 ppm (D003)? ☐ Yes ☒ No

6.4) Does this waste contain reactive sulfide ≥ 500 ppm (D003)? ☐ Yes ☒ No

6.5) Please indicate which constituent concentrations are below or above the regulatory level. Please indicate the basis used in the determination. Either "Below" or "Above" **MUST** be checked for each constituent.

Based On: ☐ **Generator Knowledge** ☒ **Analysis*** ☐ **MSDS***

***Please attach a copy. Analysis or MSDS are required for EQFL Non-hazardous wastes.**

Code		Regulatory Level TCLP (mg/l)	Concentration (if above)	Code		Regulatory Level TCLP (mg/l)	Concentration (if above)
D004	Arsenic	5	☒ Below ☐ Above	D024	m-Cresol	200	☒ Below ☐ Above
D005	Barium	100	☒ Below ☐ Above	D025	p-Cresol	200	☒ Below ☐ Above
D006	Cadmium	1	☒ Below ☐ Above	D026	Cresols	200	☒ Below ☐ Above
D007	Chromium	5	☒ Below ☐ Above	D027	1,4-Dichlorobenzene	7.5	☒ Below ☐ Above
D008	Lead	5	☒ Below ☐ Above	D028	1,2-Dicholoroethane	0.5	☒ Below ☐ Above
D009	Mercury	0.2	☒ Below ☐ Above	D029	1,1-Dichloroethylene	0.7	☒ Below ☐ Above
D010	Selenium	1	☒ Below ☐ Above	D030	2,4-Dinitrotoluene	0.13	☒ Below ☐ Above
D011	Silver	5	☒ Below ☐ Above	D031	Heptachlor	0.008	☒ Below ☐ Above
D012	Endrin	0.02	☒ Below ☐ Above	D032	Hexachlorobenzene	0.13	☒ Below ☐ Above
D013	Lindane	0.4	☒ Below ☐ Above	D033	Hexachlorobutadiene	0.5	☒ Below ☐ Above
D014	Methoxychlor	10	☒ Below ☐ Above	D034	Hexachloroethane	3.0	☒ Below ☐ Above
D015	Toxaphene	0.5	☒ Below ☐ Above	D035	Methyl Ethyl Ketone	200	☒ Below ☐ Above
D016	2,4-D	10	☒ Below ☐ Above	D036	Nitrobenzene	2	☒ Below ☐ Above
D017	2,4,5-TP (Silvex)	1	☒ Below ☐ Above	D037	Pentachlorophenol	100	☒ Below ☐ Above
D018	Benzene	0.5	☒ Below ☐ Above	D038	Pyridine	5	☒ Below ☐ Above
D019	Carbon Tetrachloride	0.5	☒ Below ☐ Above	D039	Tetrachloroethylene	0.7	☒ Below ☐ Above
D020	Chlordane	0.03	☒ Below ☐ Above	D040	Trichloroethylene	0.5	☐ Below ☒ Above
D021	Chlorobenzene	100	☒ Below ☐ Above	D041	2,4,5-Trichlorophenol	400	☒ Below ☐ Above
D022	Chloroform	6.0	☒ Below ☐ Above	D042	2,4,6-Trichlorophenol	2	☒ Below ☐ Above
D023	o-Cresol	200	☒ Below ☐ Above	D043	Vinyl Chloride	0.2	☒ Below ☐ Above

6.6) If this is a characteristic hazardous waste, does it contain underlying hazardous constituents? ☐ Yes ☒ No
If yes, please list the constituents in Section 11.

Section 7 – Non-Hazardous Wastes

For a complete list of non-hazardous waste codes, please refer to Section 7 of the EQ Resource Guide

Please list applicable waste code:

7.1) Is this a Michigan non-hazardous liquid industrial waste? ☐ Yes ☒ No
7.2) Is this a Universal waste? ☐ Yes ☒ No
7.3) Is this a Recyclable Commodity? (e.g.: computer monitors, free mercury, etc.) ☐ Yes ☒ No
7.4) Is this waste a recoverable petroleum product? ☐ Yes* ☒ No
7.5) Is this waste used oil as defined by 40 CFR Part 279? ☐ Yes* ☒ No

If you answered 'yes' to questions 7.4 or 7.5 please attach the Waste Characterization Report Addendum found in Section 7 of the EQ Resource Guide.

Section 8 – TSCA Information

8.1) What is the concentration of PCBs in the waste? ☒ None ☐ 0-5 ppm ☐ 6-49 ppm ☐ 50-499 ppm ☐ 500+ ppm
8.2) Does the waste contain PCB contamination from a source with a concentration ≥ 50 ppm? ☐ Yes ☒ No
If you answered "no" to 8.1 and 8.2, please skip to Section 9.
8.3) Has this waste been processed into a non-liquid form? ☐ Yes ☐ No
If yes, what was the concentration of PCBs prior to processing? ☐ N/A ☐ 0-499 ppm ☐ 500+ ppm
8.4) Is the non-liquid PCB waste in the form of soil, rags, debris, or other contaminated media? ☐ Yes ☐ No
8.5) Are you a PCB capacitor manufacturer or a PCB equipment manufacturer? ☐ Yes ☐ No
8.6) Has the PCB Article (e.g., transformer, hydraulic machine, PCB-contaminated electrical equipment) been drained/flushed of all PCBs and decontaminated in accordance with 40 CFR 761.60(b)? ☐ N/A ☐ Yes ☐ No

Section 9 – Clean Air Act Information

NESHAP SIC*		
2812	2836	2875
2813	2841	2879
2816	2842	2891
2819	2843	2892
2821	2844	2893
2822	2851	2895
2823	2861	2899
2824	2865	2911
2833	2869	3312
2834	2873	4953
2835	2874	9511

9.1) Is this waste subject to regulation under 40 CFR, Part 63, Subpart DD or 40 CFR, Part 264, Subpart CC (RCRA)? ☐ Yes ☐ No
(Does the waste contain >500 ppm Volatile Organic Hazardous Air Pollutants – VOHAP's or Volatile Organic Compounds – VOC's?)
For a complete list of VOHAP's, please see Section 11 of the EQ Resource Guide
9.2) Is the site, or waste, subject to any other MACT or NESHAP? ☐ Yes, please specify: _____ ☐ No
9.3) Does this waste stream contain Benzene? ☐ Yes ☐ No
If you answered "no" to 9.3, please skip to Section 10.
9.4) Does the waste stream come from a facility with one of the SIC/NAICS codes listed under the Benzene NESHAP identified in 40 CFR 61, Subpart FF? ☐ Yes ☐ No
9.5) Is the generating source of this waste stream a facility with Total Annual Benzene (TAB) ≥10 Mg/year? ☐ Yes ☐ No
For assistance in calculating the TAB, please see the TAB Worksheet in Section 9 of the EQ Resource Guide.
If you answered "no" to question 9.4 and 9.5, please skip to Section 10.
9.6) Does the waste contain >10% water? ☐ Yes ☐ No
9.7) What is the TAB quantity for your facility? _____Mg/Year
9.8) Does the waste contain >1.0 mg/kg total Benzene? ☐ Yes ☐ No
9.9) What is the total Benzene concentration in your waste? _____Percent or _____ ppmw.

(Supporting analysis must be attached. Do not use TCLP analytical results. Acceptable laboratory methods include 8020, 8240, 8260, 602 and 624.)
*For a list of NAICS codes, please refer to Section 9 of the EQ Resource Guide.

Section 10 – Fuel Blending Information

10.1) Is this waste intended for fuel blending? ☐ Yes* ☒ No
*If yes, Heat value (BTU/lb.) Chlorine (%) Water (%) Solids (%)
10.2) Is this waste intended for reclamation? ☐ Yes ☐ No (5-Gallon Sample required for all reclaim waste streams)

Section 11 – Constituent Information

Please identify your waste constituents from these four categories: ***Underlying Hazardous Constituents (UHC's), Volatile Organic Hazardous Air Pollutants (VOHAP's), Volatile Organic Compounds (VOC's) and Toxic Release Inventory Constituents (TRI)***

Constituent	Concentration	UHC?	Constituent	Concentration	UHC?
	☐ Yes ☒ No			☐ Yes ☒ No	
	☐ Yes ☒ No			☐ Yes ☒ No	
	☐ Yes ☒ No			☐ Yes ☒ No	
	☐ Yes ☒ No			☐ Yes ☒ No	
	☐ Yes ☒ No			☐ Yes ☒ No	

Please see Section 11 of the EQ Resource Guide for a list of UHC's, VOHAP's and VOC's. For a complete list of TRI constituents, please refer to 40 CFR 372.65.

Section 12 – Certification

I certify that all information (including attachments) is complete and factual and is an accurate representation of the known and suspected hazards, pertaining to the waste described herein. I authorize EQ's Resource Team to add supplemental information to the waste approval file, provided I am contacted and give verbal permission. I authorize EQ's Resource Team to obtain a sample from any waste shipment for purposes of verification and confirmation. I agree that, if EQ approves the waste described herein, all such wastes that are transported, delivered, or tendered to EQ by Generator or on Generator's behalf shall be subject to, and Generator shall be bound by, the attached Standard Terms and Conditions.

Generator Signature Mark B Yeaton Printed Name MARK B. YEATON
NAVAL SUPPORT FACILITY INDIAN HEAD, ENVIR ENGR 6/23/2006
Company Title Date

The generator's signature MUST appear on the EQ Waste Characterization Report. If the generator has authorized a third party to certify this document, a written notice (on generator letterhead) must accompany this submittal. Although the EQ Resource Team is authorized to make certain modifications to the information provided on this form, the addition or removal of waste codes and waste constituents must be documented by the generator.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MDH[illegible]
Manifest Document No. 06276
2. Page 1 of

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

3. Generator's Name and Mailing Address
Naval Surface Warfare Center Indian Head
Building 300, 101 Strauss Ave
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-[illegible]

A. State Manifest Document Number MI 10280002
B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC
6. US EPA ID Number
PAD987347115
C. State Transporter's ID
D. Transporter's Phone

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

9. Designated Facility Name and Site Address
WASTE DISPOSAL INC SITE #7 LANDFILL
4000 NORTH LAN GRAGE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number
MID048090611
G. State Facility's ID
H. Facility's Phone

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 002306VVCF
TK # 1270

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-3363
ERG#171

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. 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: Edward Schwalb
Signature
Date: Month Day Year

17. Transporter 1 Acknowledgment of Receipt of Materials

TRANSPORTER

Printed/Typed Name: Christopher C Gould
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials

Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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
Date: Month Day Year

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

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MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MDM 7000 4110
Manifest Document No. 8000
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Fleet Support Facility, Indian Head
HIGHWAY, Bldg No. 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280003
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800 [illegible]
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 800 607 5460

5. Transporter 1 Company Name: US HOUR TRANSPORT INC
6. US EPA ID Number: PAD987347515

7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
WAYNE DISPOSAL INC. SITE #2 LANDFILL
8800 NORTH LOW SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633

	HM	11. US 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.	N	RQ, HAZARDOUS WASTE, NOS (D, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	CST 23	T	F002
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062300VACF
TK # 1275

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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Printed/Typed Name: Edward Schwalk
Signature
Date: Month 06 Day 27 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

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

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

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MICHIGAN DEPARTMENT OF
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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170021190
Manifest Document No. 80004
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
Attn: Bldg 880, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-4701

A. State Manifest Document Number MI 10280004
B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC
6. US EPA ID Number PAD987347515
C. State Transporter's ID
D. Transporter's Phone 800-325-8021

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC. SITE #2 (LANDFILL)
8600 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number MID048090633
G. State Facility's ID
H. Facility's Phone 800-592-5489

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. NO. HAZARDOUS WASTE, SOLID, N.O.S. (DICHLOROETHYLENE, BARIUM, 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 002308WCF
TK # 105

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERO#171

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GENERATOR

Printed/Typed Name: Edward Shwalk
Signature
Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

13

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MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MDM17902[illegible]

Manifest Document No.

2. Page 1 of

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HNWSI, Bldg 309, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744 2263

A. State Manifest Document Number MI 10280005

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC

6. US EPA ID Number: PAD987147916

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
4800 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID980666633

G. State Facility's ID

H. Facility's Phone

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 002300WCF
TK # 1268

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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Printed/Typed Name: Edward Schwarz
Signature: Edward Schwarz
Date: Month 06 Day 27 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

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EPA Form 8700-22 (Rev. 9/88)

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MICHIGAN DEPARTMENT OF
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Part 121 of Act 451, 1994, as amended

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170021100

Manifest Document No. 90006

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
NSWC, Bldg XII, 101 Strauss St
Indian Head MD 20640

4. Generator's Phone ( ) 301 744 2263

A. State Manifest Document Number MI 10280006

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC

6. US EPA ID Number: PAD987347515

C. State Transporter's ID

D. Transporter's Phone 800-000-0611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC. SITE #2 LANDFILL
4600 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone 313-532-5424

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	M	001	DT	EST 22	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082308WCF
TK # 1265

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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GENERATOR

Printed/Typed Name: Edward Schwenk | Signature | Date Month 1 Day 4 Year 1

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name | Signature | Date Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name | Signature | Date Month Day Year

FACILITY

19. Discrepancy Indication Space

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

15

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

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MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD041[illegible]
Manifest Document No. [illegible]
2. Page 1 of

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
INSWCT, Bldg 288, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744 2363

A. State Manifest Document Number: MI 10280007
B. State Generator's ID

5. Transporter 1 Company Name: US HOLE TRANSPORT INC
6. US EPA ID Number: PAD987347515
C. State Transporter's ID
D. Transporters Phone [illegible]

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
4000 NORTH I-94 SERVICE DRIVE
BELLEVUE, MI 49111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone [illegible]

	HM	11. US 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. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 00230MVCF
TK# 416

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: [illegible] Signature: [illegible] Date: Month 08 Day 17 Year [illegible]

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: [illegible] Signature: [illegible] Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name Signature Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP 51 Rev. 7.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

17 DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170034100
Manifest Document No. 80009
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSF, Bldg 340, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2303

A. State Manifest Document Number MI 10280008
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC
6. US EPA ID Number: PAD987147515
C. State Transporter's ID
D. Transporter's Phone: 800-669-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC. SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-9491

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 22	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082308WCF
TK # 1284

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301 744-2263
ERG#171

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. 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: Edward Schwell
Signature
Date: Month 06 Day 27 Year

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Thomas Hines
Signature
Date: Month 06 Day 27 Year

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

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

17

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Rev. 7.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MDM1700034140

Manifest Document No. 20007

2. Page 1 of

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
NHLWSU Bldg 300, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2093

A. State Manifest Document Number MI 10280009

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC

6. US EPA ID Number: PAD087127515

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID UPW461905

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL INC SITE #2 LANDFILL
4000 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048096633

G. State Facility's ID

H. Facility's Phone (313) 697-5400

	HM	11. US 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. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082308WCF

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwalk
Signature
Date: Month 08 Day 27 Year 0

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

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MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MDM170023110

Manifest Document No. 80010

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
NWCWSI, Bldg 288, 101 Strauss Ave
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2337

A. State Manifest Document Number MI 10280010

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC

6. US EPA ID Number: PAD987187515

C. State Transporter's ID

D. Transporter's Phone 800 [illegible]

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WASTE DISPOSAL, INC. SITE #2 [illegible]
[illegible] SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048[illegible]

G. State Facility's ID

H. Facility's Phone 800 [illegible]

	HM	11. US 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.	☑	NO, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 22	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062308WCF

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: [illegible] Signature: [illegible] Date: Month [illegible] Day [illegible] Year [illegible]

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: [illegible] Signature: [illegible] Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name: Signature: Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

19

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Rev. 7

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 8001

2. Page 1 of

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

3. Generator's Name and Mailing Address
Naval Suppol Facility, Indian Head
HHCWSF, Bldg 300, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744 2263

A. State Manifest Document Number MI 10280011

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC

6. US EPA ID Number: PAD087342515

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID: UAW 461 96

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
4000 NORTH I 94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone (734) 697-6474

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL # 062308WCF
TR # 192-3

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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 Schwab
Signature
Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name
Signature
Date: Month Day Year

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

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WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

21

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Part 121 of Act 451, 1994, as amended.

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024100
Manifest Document No. 80012
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HHCWSJ, Bldg 288, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2763

A. State Manifest Document Number MI 10280012
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 800-535-5111
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 517-323-5481

5. Transporter 1 Company Name: US BULK TRANSPORT INC
6. US EPA ID Number: PAD987147515
7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633

	HM	11. US 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. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082306VKCF
TK # 1152

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward L. Schwark
Signature: [signature]
Date: Month 11 Day 17 Year [illegible]

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

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Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80313

2. Page 1 of

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
NAVSEA Bldg 780, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-4361

A. State Manifest Document Number MI 10280013

B. State Generator's ID

5. Transporter 1 Company Name: US FRUK TRANSPORT INC.

6. US EPA ID Number: PAD087247515

C. State Transporter's ID: UPW 46196

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC. SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☑	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082308VKF
TK# 149

K. Handling Codes
a
b
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d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwerk
Signature: Edward Schwerk
Date: Month 06 Day 17 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

22

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EQP 5 Rev. 7

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ENVIRONMENTAL QUALITY

23
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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD1170021100
Manifest Document No. 80014
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility Indian Head
NDWSI, Bldg 333, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2700

A. State Manifest Document Number MI 10280014
B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC
6. US EPA ID Number PAD987347515

C. State Transporter's ID PAU461965
D. Transporter's Phone 800-673-5411

7. Transporter 2 Company Name
8. US EPA ID Number

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC. SITE #2 LANDFILL
4000 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number MID048090631

G. State Facility's ID
H. Facility's Phone 800-592-4460

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062308WCF
TK# 359

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301 744-2263
ERG#171

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. 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: Edward Schwark
Signature: Edward Schwark
Date: Month Day Year

GENERATOR

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: [illegible]
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

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

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP 51
Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

24 DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024100

Manifest Document No. 8001

2. Page 1 of

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HNDWEU, Bldg 290, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744 2363

A. State Manifest Document Number MI 10280015

B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC

6. US EPA ID Number
PAT000714515

C. State Transporter's ID URU461965

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
18550 NORTH TON SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number
MID048090633

G. State Facility's ID

H. Facility's Phone
(800) 592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 002306WCF
TK # 208

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: [signature]
Date: Month 06 Day 27 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Michael Pelt
Signature: [signature]
Date: Month 06 Day 27 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP 51
Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

25 DO NOT WRITE IN THIS SPACE
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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MDH 700211100

Manifest Document No. 80016

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
NHOWSD, Bldg 300, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280016

B. State Generator's ID

5. Transporter 1 Company Name: US DUCK TRANSPORT INC

6. US EPA ID Number: PAD987307515

C. State Transporter's ID: UPW 461965

D. Transporter's Phone: [illegible]

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC. SITE #2 (AUDIT II)
4650 NORTH LAN SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090611

G. State Facility's ID

H. Facility's Phone: [illegible]

	HM	11. US 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. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 25	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062308WCF
TK # 124

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: [illegible] Signature: [illegible] Date: Month Day Year

17. Transporter 1 Acknowledgment of Receipt of Materials

TRANSPORTER

Printed/Typed Name: [illegible] Signature: [illegible] Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials

Printed/Typed Name Signature Date: Month Day Year

19. Discrepancy Indication Space

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 25 Signature Date: Month Day Year

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP 5[illegible] Rev. 7

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

26

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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD041700334 MD

Manifest Document No. 86011

2. Page 1 of

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

3. Generator's Name and Mailing Address
Naval Support Facility Indian Head
NAVSUP Bldg 300, 101 Strauss St
Indian Head MD 20640

4. Generator's Phone ( ) 301 744 2000

A. State Manifest Document Number MI 10280017

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD087347315

C. State Transporter's ID: UPUS4196C

D. Transporter's Phone: 800 [illegible]

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL INC SITE #2 LANDFILL
6000 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048006613

G. State Facility's ID

H. Facility's Phone: 734 [illegible]

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 862301WCF
Tank bottoms

K. Handling Codes
a.
b.
c.
d.

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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Printed/Typed Name: Kenneth Schwartz | Signature | Date: Month 06 Day 27 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: James Nunnaseh | Signature | Date: Month 6 Day 27 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name | Signature | Date: Month Day Year

19. Discrepancy Indication Space

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

26

GENERATOR

TRANSPORTER

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

EQP 51 Rev. 7/

GENERATOR 1st COPY

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

27 DO NOT WRITE IN THIS SPACE
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Part 121 of Act 451, 1994, as amended

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80018
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280018
B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC.
6. US EPA ID Number PAD987347515
C. State Transporter's ID UPW461965
D. Transporter's Phone 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number MID048090633
G. State Facility's ID
H. Facility's Phone 800-592-5480

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062308WCF
TKT 1273

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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Printed/Typed Name: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 28 Year 06

GENERATOR

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Cliff Clapham
Signature
Date: Month 06 Day 28 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

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

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY PO BOX 30028

EQP 511 Rev. 7/0

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

28
DO NOT WRITE IN THIS SPACE
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Part 121 of Act 451, 1994, as amended

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80019
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280019
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW461965
D. Transporter's Phone: 800-603-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒ RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 544-1

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 23 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Johnny Fugate
Signature: Johnny Fugate
Date: Month 06 Day 28 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY PO BOX [illegible]

EQP 51 Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

29

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under authority of Part 111 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80920

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 269, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280020

B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC.

6. US EPA ID Number PAD987347515

C. State Transporter's ID UPW 461965

D. Transporter's Phone 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number - -

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number MID048090633

G. State Facility's ID

H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF

TK-H

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 23 Year 06

GENERATOR

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: RICHARD STEVENSON
Signature: [illegible]
Date: Month 06 Day 23 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

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

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

29

EPA Form 8700-22 (Rev. 9/88)

To be mailed by WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

EQP 51 Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

30
DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80021

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280021

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW461965

D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 3114 XBX-2195 PA

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 19 Year 06

GENERATOR

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: TED HELKER
Signature: Ted Helker
Date: Month 06 Day 20 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

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

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

30

EPA Form 8700-22 (Rev. 9/88)

To be mailed by WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

EQP 51 Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

31
DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80023

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280023

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW 461956

D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK # 1207

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwoerk
Signature: Edward Schwoerk
Date: Month 06 Day 28 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: DANNY STATE
Signature
Date: Month 06 Day 28 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

EQP 51
Rev. 7/

DEQ WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

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DO NOT WRITE IN THIS SPACE
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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80024

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280024

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW461965

D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 1295

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: EDWARD Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 27 Year 02

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: GREG YARNELL
Signature: Greg Yarnell
Date: Month 06 Day 28 Year 02

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

EQP 5 Rev. 7

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80025
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280025
B. State Generator's ID
C. State Transporter's ID UPW 461965
D. Transporter's Phone 800-609-6611
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 800-592-5489

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
7. Transporter 2 Company Name
8. US EPA ID Number: - -
9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒ RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306VVCF
TK# 1924

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 27 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Michael Eugene Wagner
Signature
Date: Month 06 Day 25 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name
Signature
Date: Month Day Year

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

EQP 51 Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80026
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280026
B. State Generator's ID
C. State Transporter's ID UPW461965
D. Transporter's Phone 800-609-6611
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 800-592-5489

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
7. Transporter 2 Company Name
8. US EPA ID Number
9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK # 192-5

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: EDWARD SCHWOON K
Signature
Date: Month 06 Day 23 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: JOHN FLAUGH
Signature
Date: Month 06 Day 23 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)
To be mailed by
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
EQP 51 Rev. 7/

DEQ WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Required under authority of Part 111 in Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80027
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number: MI 10280027
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW 461 96
D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name
8. US EPA ID Number: - -
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	HM	11. US 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. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082306WCF
TK # 109

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwerk
Signature: Edward Schwerk
Date: Month Day Year 08 23 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Jesse DeGarmo
Signature: Jesse DeGarmo
Date: Month Day Year 06 20 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name
Signature
Date: Month Day Year

35

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

EQP 5110 Rev. 7/03

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 89028

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280028

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW 461965

D. Transporter's Phone: 800-603-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 136

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 28 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials

TRANSPORTER

Printed/Typed Name: Larry Hood
Signature: Larry Hood
Date: Month 06 Day 28 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials

Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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
Date: Month Day Year

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

EQP 51
Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

37
DO NOT WRITE IN THIS SPACE
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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MD4170024109
Manifest Document No.: 80029
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number: MI 10280029
B. State Generator's ID:

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW 461905
D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name:
8. US EPA ID Number: - -
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID:
H. Facility's Phone: 800-592-5499

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒ RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK # 110

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month Day Year

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: David Wagner
Signature: David Wagner
Date: Month 6 Day 28 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

EQP 51
Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

38
DO NOT WRITE IN THIS SPACE
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Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80030

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280030

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID UPW461965

D. Transporter's Phone 800-605-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062308WCF
TK# 110-1

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schaeck | Signature: Edward Schaeck | Date: Month 06 Day 27 Year 04

17. Transporter 1 Acknowledgment of Receipt of Materials

Printed/Typed Name: Tammy Wagner | Signature: Tammy L Wagner | Date: Month 06 Day 28 Year 04

18 Transporter 2 Acknowledgment of Receipt of Materials

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

19. Discrepancy Indication Space

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

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

38

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY PO BOX 30038

EQP 5 Rev. 7

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024100
Manifest Document No. 89931
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280031
B. State Generator's ID
C. State Transporter's ID JPW 461 965
D. Transporter's Phone 800-609-6611
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 800-592-5489

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
7. Transporter 2 Company Name
8. US EPA ID Number: - -
9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK # 179

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 28 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Brian Bowser
Signature: Brian Bowser
Date: Month 06 Day 28 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30028

EQP 51
Rev. 7.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80032

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280032

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW 461965

D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number: - -

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5489

	HM	11. US 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. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TKF 150

K. Handling Codes
a.
b.
c.
d.

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 12 Year

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: CHIP Reynolds
Signature
Date: Month 06 Day 27 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

40

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY PO BOX 30038

EQP 51 Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
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Part 121 of Act 451, 1994, as amended.

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80033

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280033

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID

D. Transporter's Phone 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT		T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER _____
ERG#171

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. 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: EDWARD SCHWENK
Signature: Edward Schwenk
Date: Month 06 Day Year

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: MAURICE BART
Signature: Maurice Bart
Date: Month 06 Day 28 Year 0

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY PO BOX 30038

EQP 51 Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80034
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280034
B. State Generator's ID
C. State Transporter's ID UPW461965
D. Transporter's Phone 800-609-6611
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 800-592-5489

5. Transporter 1 Company Name
US BULK TRANSPORT INC.
6. US EPA ID Number PAD987347515

7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number MID048090633

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 160-2

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: EDWARD SCHWENK
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: THOMAS J WHITEHILL
Signature: Thomas Whitehill
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038

EQP 5
Rev. 7

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80035

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 269, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280035

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW 461965

D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5490

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062308WCF
TK# 178

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schawenk
Signature: Edward Schawenk
Date: Month 06 Day 29 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Victor L Tracy
Signature: Victor L Tracy
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038

EQP 5
Rev.

1038

DEQ

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

44

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ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under authority of Part 111 and Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80036

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280036

B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC.

6. US EPA ID Number PAD987347515

C. State Transporter's ID UPW 461 965

D. Transporter's Phone 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number MID048090633

G. State Facility's ID

H. Facility's Phone 800-592-5489

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF

TK # 1038

K. Handling Codes
a.
b.
c.
d.

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Greg Paslar
Signature: [illegible]
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name
Signature
Date: Month Day Year

44

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY PO BOX 30038

EQP 5 Rev. 7

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

45
DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under authority of Part 111 and Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80037

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280037

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID UPW 461965

D. Transporter's Phone 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone 800-592-5489

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062308WCF
TK #

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 04

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: James Humphrey
Signature: James Humphrey
Date: Month 06 Day 29 Year 04

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30028

EQP 5
Rev. 7

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MD4170024109

Manifest Document No.: 80038

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number: MI 10280038

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW 461965

D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number: - -

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK #

K. Handling Codes
a
b
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d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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GENERATOR

Printed/Typed Name: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Murdo Urquhart
Signature: Murdo Urquhart
Date: Month 06 Day 29 Year 06

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

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038

EQP 5
Rev. 7

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MD4170024109
Manifest Document No.: 80037
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number: MI 10280039
B. State Generator's ID
C. State Transporter's ID: UPW 461 965
D. Transporter's Phone: 800-609-6611
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: 800-592-5489

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515

7. Transporter 2 Company Name
8. US EPA ID Number: - -

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK#

K. Handling Codes
a
b
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d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263-
ERG#171

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GENERATOR

Printed/Typed Name: EDWARD SCHWENK
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: SCOTT FRANK
Signature: Scott Frank
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038

EQP 5
Rev. 7

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

48
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Required under authority of Act 451, 1994, as amended. Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80670

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280040

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW 761965

D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 1297

K. Handling Codes
a
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c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwarz
Signature: Edward Schwarz
Date: Month 0 6 Day 2 9 Year 0 1

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Lori Lynn Beagle
Signature: Lori Lynn Beagle
Date: Month 0 6 Day 2 9 Year 0 1

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY PO BOX 30038

EQP 51 Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

49
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Part 121 of Act 451, 1994, as amended.

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 8004

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number: MI 10280041

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW 461965

D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number: - -

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF

K. Handling Codes
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d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER_____-
ERG#171

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Printed/Typed Name: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Barry K. Beegle
Signature: Barry K. Beegle
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038

EQP 51
Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80042

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280042

B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC.

6. US EPA ID Number PAD987347515

C. State Transporter's ID UPW4d965

D. Transporter's Phone 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number MID048090633

G. State Facility's ID

H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 21	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK # 359

K. Handling Codes
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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Printed/Typed Name: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 08

GENERATOR

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Quintin Wantel
Signature:
Date: Month 06 Day 29 Year 08

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

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

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

50

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038

EQP 5
Rev. 7

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 88043
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280043
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: VRW461965
D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name
8. US EPA ID Number: - -
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 21	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 149

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: ERIC HARTMAN
Signature: Eric Hartman
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038

EQP 511
Rev. 7/

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80044

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 269, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280044

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW 461956

D. Transporter's Phone: 800-503-5611

7. Transporter 2 Company Name

8. US EPA ID Number: - -

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5489

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 2	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082306WCF
TK # 134

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials

Printed/Typed Name: Art Pollock
Signature: Art Pollock
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials

Printed/Typed Name
Signature
Date: Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

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
Date: Month Day Year

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038

EQP 5
Rev. 7

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024100
Manifest Document No. 80045
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280045
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW 461965
D. Transporter's Phone: 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒ RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 21	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 186

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date (Month Day Year): 06 29 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: James Jenary
Signature: James Jenary
Date (Month Day Year): 06 28 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date (Month Day Year)

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP 511
Rev. 7/0

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80048

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280046

B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC.

6. US EPA ID Number PAD987347515

C. State Transporter's ID UPW 461965

D. Transporter's Phone 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number MID048090633

G. State Facility's ID

H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 20	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF

TK# 1152

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263 -
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Andrew D Anderson
Signature:
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038

EQP 51
Rev. 7.

NON-HAZARDOUS WASTE MANIFEST

55

(Form designed for use on elite (12 pitch) typewriter)

HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. N / A	Manifest Document No. 001	2. Page 1 of 1
3. Generator's Name and Mailing Address Support Facility, Indian Head NAVSWSJ, Bldg 286, 101 Strauss Avenue Indian Head, MD 20640-5035 Generator's Phone (301) 744-2263			
5. Transporter 1 Company Name Earthcare Solutions Inc.	6. US EPA ID Number N / A	A. State Transporter's ID B. Transporter 1 Phone (540) 898-7633	
7. Transporter 2 Company Name	8. US EPA ID Number	C. State Transporter's ID D. Transporter 2 Phone	
9. Designated Facility Name and Site Address ~~Charles County Municipal Landfill~~ ~~12305 Billingsley Road~~ Farm Services ~~Waldorf, MD 20602~~	10. US EPA ID Number N / A	E. State Facility's ID F. Facility's Phone (301) 932-3440	

11. WASTE DESCRIPTION	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.
a. Non Hazardous, Non DOT Regulated Material, (Soil) Construction Debris		DT	20000	P
b.				
c.				
d.				

G. Additional Descriptions for Materials Listed Above

H. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Truck #_____, Site 42
Note: Manifest weight is estimated

16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.

Printed/Typed Name	Signature	Date (Month Day Year)
SHAWN JURGENSON	Bill Smy for S. Jurgensen	6 21 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month Day Year)
Barry A. Smith	Barry A. Smith	6 21 06

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date (Month Day Year)

GENERATOR — TRANSPORTER — FACILITY

NON-HAZARDOUS WASTE

55

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NON-HAZARDOUS WASTE MANIFEST

(Form designed for use on elite (12 pitch) typewriter)

56

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. N / A

Manifest Document No. 002

2. Page 1 of 1

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
Code HNZWSJ, Bldg 286, 101 Strauss Avenue
Indian Head, MD 20640-5035

4. Generator's Phone (301) 744-2263

5. Transporter 1 Company Name: Earthcare Solutions Inc.

6. US EPA ID Number: N / A

A. State Transporter's ID

B. Transporter 1 Phone: (540) 898-7633

7. Transporter 2 Company Name

8. US EPA ID Number

C. State Transporter's ID

D. Transporter 2 Phone

9. Designated Facility Name and Site Address
Charles County Municipal Landfill
12305 Billingsley Road
Waldorf, MD 20602
Farm Services

10. US EPA ID Number: N / A

E. State Facility's ID

F. Facility's Phone: (301) 932-3440

11. WASTE DESCRIPTION

	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.
a. Non Hazardous, Non DOT Regulated Material, (Soil) CONSTRUCTION DEBRIS		DT	20000	P
b.				
c.				
d.				

G. Additional Descriptions for Materials Listed Above

H. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Truck #_____, Site 42
Note: Manifest weight is estimated

GENERATOR

16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.

Printed/Typed Name: SHAUN JURGENSEN
Signature: [signature] for S. JURGENSEN
Date: Month 6 Day 21 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month 6 Day 21 Year 06

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Barry A. Smith
Signature: Barry A. Smith
Date: Month 6 Day 21 Year 06

FACILITY

19. Discrepancy Indication Space

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

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

NON-HAZARDOUS WASTE

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FARM SERVICE INC.

17319 Livingston Road
Accokeek, MD 20607
(301) 233-2573

SOLD TO Barry Smith

SHIP TO Yard

CUSTOMER'S ORDER	SALESMAN	TERMS	SHIPPED VIA	F.O.B.	DATE
PS	CLS	COD	B Smith Trucking	Dest	6-21-06

23.04	Tons Broken Asphalt	5	00	115	20
	TOTAL Due:		$	115	20
	PAID CASH CK NO. DATE 6-21-06				
	NOT RESPONSIBLE FOR DAMAGE TO PRIVATE PROPERTY DURING DELIVERY OF MATERIALS.				
	SIGNATURE: Barry A. Smith				

NON

16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.

Printed/Typed Name: SHAWN JORGENSEN | Signature: Bill Smy for S. JORGENSEN | Date: Month 6 Day 21 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

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

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: BARRY A. Smith | Signature: Barry A. Smith | Date: Month 6 Day 21 Year 06

FACILITY

19. Discrepancy Indication Space

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

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

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007109

DELIVERY TICKET

FARM SERVICE INC.

17319 Livingston Road
Accokeek, MD 20607
(301) 283-2573

TO Barry Smith

SHIP TO Yard

R'S ORDER	SALESMAN	TERMS	SHIPPED VIA	F.O.B.	DATE
5	CCS	COD	B. Smith Trucking	Dest.	6-21-06

1	Tons Broken Asphalt	5 00	107	—
	TOTAL Due:		$107	—
	CASH 6-21-06			
	NOT RESPONSIBLE FOR DAMAGE TO PRIVATE PROPERTY DURING DELIVERY OF MATERIALS.			
	SIGNATURE: Barry A. Smith			

16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.

Printed/Typed Name	Signature	Date (Month / Day / Year)
SHAUN JURGENSEN	Bob Smy for S. JORGENSEN	6 / 21 / 06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month / Day / Year)
		6 / 21 / 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Date (Month / Day / Year)
Barry A. Smith	Barry A. Smith	6 / 21 / 06

19. Discrepancy Indication Space

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

Printed/Typed Name	Signature	Date (Month / Day / Year)

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APPENDIX C

ANALYTICAL REPORTS
INTERIM REMOVAL ACTION AT
SITE 57-BUILDING 292 TCE CONTAMINATION
NAVAL SUPPORT FACILITY INDIAN HEAD
INDIAN HEAD, MARYLAND

CONTRACT NO. N62470-03-D-4402
TASK ORDER NO. 025

Prepared for:
Naval Facilities Engineering Command Washington
1314 Harwood Street, S.E.
Washington Navy Yard, DC 20374-5018

Prepared by:

Field Support Services, Inc.
6303 Ivy Lane, Suite 800
Greenbelt, Maryland 20770

and

Shaw Environmental, Inc.
500 E. Main Street, Suite 1630
Norfolk, Virginia 23510

September 2006
Project No. 120359

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3.1 WASTE CHARACTERIZATION..... SEPARATE ON CD
3.2 DECONTAMINATION WATER ..... SEPARATE ON CD

SECTION 1.0
SUMMARY TABLE REPORTS
SITE 57 AREAS A, B, & C
INDIAN HEAD, MARYLAND
SHAW PROJECT NO. 120359, T.O. 025

SECTION 1.1
WASTE CHARACTERIZATION
SUMMARY TABLE

LabLink Analytical Data Report
Indian Head 120359

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261 6/96)*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F41456-1	Aroclor 1016	12674-11-2	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Aroclor 1221	11104-28-2	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Aroclor 1232	11141-16-5	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Aroclor 1242	53469-21-9	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Aroclor 1248	12672-29-6	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Aroclor 1254	11097-69-1	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Aroclor 1260	11096-82-5	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Total PCBs		SW846 8082	ND		ug/kg	39		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	TPH (C10-C28)		SW846 8015 M	11.3		mg/kg	9.7		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	o-Terphenyl	84-15-1	SW846 8015 M	98		%	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Tetrachloro-m-xylene	877-09-8	SW846 8082	85		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Decachlorobiphenyl	2051-24-3	SW846 8082	85		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	TPH-GRO (C6-C10)		SW846 8015	6.28	J	mg/kg	6.7		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	4-Bromofluorobenzene	460-00-4	SW846 8015	82		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	aaa-Trifluorotoluene	98-08-8	SW846 8015	92		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Ignitability (Flashpoint) (b)		SW846 1010	>200	>	Deg. F			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Sulfide Reactivity		SW846 CHAP7	<50	<	mg/kg	50		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Corrosivity as pH		SW846 CHAP7	6.2					1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Cyanide Reactivity		SW846 CHAP7	<1.5	<	mg/kg	1.5		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Solids, Percent		EPA 160.3 M	85.8		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4-D	94-75-7	SW846 8151	ND		mg/l	0.015	10	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4,5-TP (Silvex)	93-72-1	SW846 8151	ND		mg/l	0.002	1	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	gamma-BHC (Lindane)	58-89-9	SW846 8081A	ND		mg/l	0.0005	0.4	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Chlordane	12789-03-6	SW846 8081A	ND		mg/l	0.005	0.03	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Endrin	72-20-8	SW846 8081A	ND		mg/l	0.001	0.02	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Heptachlor	76-44-8	SW846 8081A	ND		mg/l	0.0005	0.008	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Heptachlor epoxide	1024-57-3	SW846 8081A	ND		mg/l	0.0005	0.008	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Methoxychlor	72-43-5	SW846 8081A	ND		mg/l	0.001	10	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Toxaphene	8001-35-2	SW846 8081A	ND		mg/l	0.025	0.5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Tetrachloro-m-xylene	877-09-8	SW846 8081A	92		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4-DCAA	19719-28-9	SW846 8151	105		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Decachlorobiphenyl	2051-24-3	SW846 8081A	95		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Quant Factor		SW846 8081A	0.1		none			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Arsenic	7440-38-2	SW846 6010B	0.026	B	mg/l	0.04	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Barium	7440-39-3	SW846 6010B	0.38	B	mg/l	1	100	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Cadmium	7440-43-9	SW846 6010B	0.0052		mg/l	0.005	1	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Chromium	7440-47-3	SW846 6010B	0.0021	B	mg/l	0.01	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Lead	7439-92-1	SW846 6010B	0.22		mg/l	0.05	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Mercury	7439-97-6	SW846 7470A	0.001	U	mg/l	0.01	0.2	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Selenium	7782-49-2	SW846 6010B	0.04	U	mg/l	0.1	1	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Silver	7440-22-4	SW846 6010B	0.0015	B	mg/l	0.01	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2-Methylphenol	95-48-7	SW846 8270C	ND		mg/l	0.05	200	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	3&4-Methylphenol		SW846 8270C	ND		mg/l	0.05	200	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Pentachlorophenol	87-86-5	SW846 8270C	ND		mg/l	0.25	100	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4,5-Trichlorophenol	95-95-4	SW846 8270C	ND		mg/l	0.05	400	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4,6-Trichlorophenol	88-06-2	SW846 8270C	ND		mg/l	0.05	2	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	1,4-Dichlorobenzene	106-46-7	SW846 8270C	ND		mg/l	0.05	7.5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4-Dinitrotoluene	121-14-2	SW846 8270C	ND		mg/l	0.05	0.13	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Hexachlorobenzene	118-74-1	SW846 8270C	ND		mg/l	0.05	0.13	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Hexachlorobutadiene	87-68-3	SW846 8270C	ND		mg/l	0.05	0.5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Hexachloroethane	67-72-1	SW846 8270C	ND		mg/l	0.05	3	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Nitrobenzene	98-95-3	SW846 8270C	ND		mg/l	0.05	2	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Pyridine	110-86-1	SW846 8270C	ND		mg/l	0.1	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2-Fluorophenol	367-12-4	SW846 8270C	43		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Phenol-d5	4165-62-2	SW846 8270C	26		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4,6-Tribromophenol	118-79-6	SW846 8270C	85		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Nitrobenzene-d5	4165-60-0	SW846 8270C	77		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2-Fluorobiphenyl	321-60-8	SW846 8270C	78		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Terphenyl-d14	1718-51-0	SW846 8270C	83		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Benzene	71-43-2	SW846 8260B	ND		mg/l	0.01	0.5	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Chlorobenzene	108-90-7	SW846 8260B	ND		mg/l	0.02	100	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Chloroform	67-66-3	SW846 8260B	ND		mg/l	0.02	6	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Carbon tetrachloride	56-23-5	SW846 8260B	ND		mg/l	0.02	0.5	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	1,1-Dichloroethylene	75-35-4	SW846 8260B	ND		mg/l	0.02	0.7	10	120359-DW-SO-001	14-Jun-06	10:15

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Including: TCLP Maximum Contaminant Concentrations (40 CFR 261 6/96)*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F41456-1A	1,2-Dichloroethane	107-06-2	SW846 8260B	ND		mg/l	0.02	0.5	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	p-Dichlorobenzene	106-46-7	SW846 8260B	ND		mg/l	0.02	7.5	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Methyl ethyl ketone	78-93-3	SW846 8260B	ND		mg/l	0.1	200	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Tetrachloroethylene	127-18-4	SW846 8260B	ND		mg/l	0.02	0.7	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Trichloroethylene	79-01-6	SW846 8260B	0.0274		mg/l	0.02	0.5	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Vinyl chloride	75-01-4	SW846 8260B	ND		mg/l	0.01	0.2	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Dibromofluoromethane	1868-53-7	SW846 8260B	105		%			10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Toluene-D8	2037-26-5	SW846 8260B	95		%			10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	4-Bromofluorobenzene	460-00-4	SW846 8260B	112		%			10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	1,2-Dichloroethane-D4	17060-07-0	SW846 8260B	114		%			10	120359-DW-SO-001	14-Jun-06	10:15

(b) Not ignitable
Found 0 results exceeding regulatory limits.
** Indicates result outside regulatory limits.
* Regulatory limits listed in this document have been obtained from the lastest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.

SECTION 1.2
DECONTAMINATION WATER
SUMMARY TABLE

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Including: TCLP Maximum Contaminant Concentrations (40 CFR 261 6/96)*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	Limit	DF	Client ID	Collected	Time
F42096-1	2,4-D	94-75-7	SW846 8151	ND		mg/l	0.015	10	1	120359-DW-001	12-Jul-06	13:00
F42096-1	2,4,5-TP (Silvex)	93-72-1	SW846 8151	ND		mg/l	0.002	1	1	120359-DW-001	12-Jul-06	13:00
F42096-1	gamma-BHC (Lindane)	58-89-9	SW846 8081A	ND		mg/l	0.0005	0.4	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Chlordane	12789-03-6	SW846 8081A	ND		mg/l	0.005	0.03	1	120359-DW-001	12-Jul-06	13:00
F42096-1	TPH (C10-C28) (a)		SW846 8015 M	0.515		mg/l	0.24		1	120359-DW-001	12-Jul-06	13:00
F42096-1	Endrin	72-20-8	SW846 8081A	ND		mg/l	0.001	0.02	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Heptachlor	76-44-8	SW846 8081A	ND		mg/l	0.0005	0.008	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Heptachlor epoxide	1024-57-3	SW846 8081A	ND		mg/l	0.0005	0.008	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Methoxychlor	72-43-5	SW846 8081A	ND		mg/l	0.001	10	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Toxaphene	8001-35-2	SW846 8081A	ND		mg/l	0.025	0.5	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Aroclor 1016	12674-11-2	SW846 8082	ND		ug/l	0.5		1	120359-DW-001	12-Jul-06	13:00
F42096-1	Aroclor 1221	11104-28-2	SW846 8082	ND		ug/l	0.5		1	120359-DW-001	12-Jul-06	13:00
F42096-1	Aroclor 1232	11141-16-5	SW846 8082	ND		ug/l	0.5		1	120359-DW-001	12-Jul-06	13:00
F42096-1	Aroclor 1242	53469-21-9	SW846 8082	ND		ug/l	0.5		1	120359-DW-001	12-Jul-06	13:00
F42096-1	Aroclor 1248	12672-29-6	SW846 8082	ND		ug/l	0.5		1	120359-DW-001	12-Jul-06	13:00
F42096-1	Aroclor 1254	11097-69-1	SW846 8082	ND		ug/l	0.5		1	120359-DW-001	12-Jul-06	13:00
F42096-1	Aroclor 1260	11096-82-5	SW846 8082	ND		ug/l	0.5		1	120359-DW-001	12-Jul-06	13:00
F42096-1	Total PCBs		SW846 8082	ND		ug/l	0.99		1	120359-DW-001	12-Jul-06	13:00
F42096-1	Tetrachloro-m-xylene	877-09-8	SW846 8081A	94		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	2,4-DCAA	19719-28-9	SW846 8151	148		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	Tetrachloro-m-xylene	877-09-8	SW846 8082	55		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	o-Terphenyl	84-15-1	SW846 8015 M	84		%	0.48		1	120359-DW-001	12-Jul-06	13:00
F42096-1	Decachlorobiphenyl	2051-24-3	SW846 8081A	84		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	Decachlorobiphenyl	2051-24-3	SW846 8082	33		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	TPH-GRO (C6-C10)		SW846 8015	ND		mg/l	0.1		1	120359-DW-001	12-Jul-06	13:00
F42096-1	4-Bromofluorobenzene	460-00-4	SW846 8015	69		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	aaa-Trifluorotoluene	98-08-8	SW846 8015	82		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	Ignitability (Flashpoint)		SW846 1010	>200	>	Deg. F			1	120359-DW-001	12-Jul-06	13:00
F42096-1	Corrosivity as pH		SW846 CHAP7	9.4					1	120359-DW-001	12-Jul-06	13:00
F42096-1	Cyanide Reactivity		SW846 CHAP7	<1.5	<	mg/l	1.5		1	120359-DW-001	12-Jul-06	13:00
F42096-1	Sulfide Reactivity		SW846 CHAP7	<50	<	mg/l	50		1	120359-DW-001	12-Jul-06	13:00
F42096-1	Arsenic	7440-38-2	SW846 6010B	0.073		mg/l	0.01	5	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Barium	7440-39-3	SW846 6010B	0.2	U	mg/l	1	100	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Cadmium	7440-43-9	SW846 6010B	0.0003	U	mg/l	0.005	1	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Chromium	7440-47-3	SW846 6010B	0.0006	U	mg/l	0.01	5	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Lead (b)	7439-92-1	SW846 6010B	0.0035	B	mg/l	0.1	5	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Mercury	7439-97-6	SW846 7470A	0.001	U	mg/l	0.01	0.2	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Selenium	7782-49-2	SW846 6010B	0.02	U	mg/l	0.05	1	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Silver	7440-22-4	SW846 6010B	0.0009	U	mg/l	0.01	5	1	120359-DW-001	12-Jul-06	13:00
F42096-1	2-Methylphenol	95-48-7	SW846 8270C	ND		mg/l	0.05	200	1	120359-DW-001	12-Jul-06	13:00
F42096-1	3&4-Methylphenol		SW846 8270C	ND		mg/l	0.05	200	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Pentachlorophenol	87-86-5	SW846 8270C	ND		mg/l	0.25	100	1	120359-DW-001	12-Jul-06	13:00
F42096-1	2,4,5-Trichlorophenol	95-95-4	SW846 8270C	ND		mg/l	0.05	400	1	120359-DW-001	12-Jul-06	13:00
F42096-1	2,4,6-Trichlorophenol	88-06-2	SW846 8270C	ND		mg/l	0.05	2	1	120359-DW-001	12-Jul-06	13:00
F42096-1	1,4-Dichlorobenzene	106-46-7	SW846 8270C	ND		mg/l	0.05	7.5	1	120359-DW-001	12-Jul-06	13:00
F42096-1	2,4-Dinitrotoluene	121-14-2	SW846 8270C	ND		mg/l	0.05	0.13	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Hexachlorobenzene	118-74-1	SW846 8270C	ND		mg/l	0.05	0.13	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Hexachlorobutadiene	87-68-3	SW846 8270C	ND		mg/l	0.05	0.5	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Hexachloroethane	67-72-1	SW846 8270C	ND		mg/l	0.05	3	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Nitrobenzene	98-95-3	SW846 8270C	ND		mg/l	0.05	2	1	120359-DW-001	12-Jul-06	13:00
F42096-1	Pyridine	110-86-1	SW846 8270C	ND		mg/l	0.05	5	1	120359-DW-001	12-Jul-06	13:00
F42096-1	2-Fluorophenol	367-12-4	SW846 8270C	43		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	Phenol-d5	4165-62-2	SW846 8270C	29		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	2,4,6-Tribromophenol	118-79-6	SW846 8270C	78		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	Nitrobenzene-d5	4165-60-0	SW846 8270C	83		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	2-Fluorobiphenyl	321-60-8	SW846 8270C	79		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	Terphenyl-d14	1718-51-0	SW846 8270C	97		%			1	120359-DW-001	12-Jul-06	13:00
F42096-1	Benzene	71-43-2	SW846 8260B	ND		mg/l	0.01	0.5	10	120359-DW-001	12-Jul-06	13:00
F42096-1	Chlorobenzene	108-90-7	SW846 8260B	ND		mg/l	0.02	100	10	120359-DW-001	12-Jul-06	13:00
F42096-1	Chloroform	67-66-3	SW846 8260B	ND		mg/l	0.02	6	10	120359-DW-001	12-Jul-06	13:00

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Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	Limit	DF	Client ID	Collected	Time
F42096-1	Carbon tetrachloride	56-23-5	SW846 8260B	ND		mg/l	0.02	0.5	10	120359-DW-001	12-Jul-06	13:00
F42096-1	1,1-Dichloroethylene	75-35-4	SW846 8260B	ND		mg/l	0.02	0.7	10	120359-DW-001	12-Jul-06	13:00
F42096-1	1,2-Dichloroethane	107-06-2	SW846 8260B	ND		mg/l	0.02	0.5	10	120359-DW-001	12-Jul-06	13:00
F42096-1	p-Dichlorobenzene	106-46-7	SW846 8260B	ND		mg/l	0.02	7.5	10	120359-DW-001	12-Jul-06	13:00
F42096-1	Methyl ethyl ketone	78-93-3	SW846 8260B	ND		mg/l	0.1	200	10	120359-DW-001	12-Jul-06	13:00
F42096-1	Tetrachloroethylene	127-18-4	SW846 8260B	ND		mg/l	0.02	0.7	10	120359-DW-001	12-Jul-06	13:00
F42096-1	Trichloroethylene	79-01-6	SW846 8260B	ND		mg/l	0.02	0.5	10	120359-DW-001	12-Jul-06	13:00
F42096-1	Vinyl chloride	75-01-4	SW846 8260B	ND		mg/l	0.01	0.2	10	120359-DW-001	12-Jul-06	13:00
F42096-1	Dibromofluoromethane	1868-53-7	SW846 8260B	102		%			10	120359-DW-001	12-Jul-06	13:00
F42096-1	Toluene-D8	2037-26-5	SW846 8260B	100		%			10	120359-DW-001	12-Jul-06	13:00
F42096-1	4-Bromofluorobenzene	460-00-4	SW846 8260B	111		%			10	120359-DW-001	12-Jul-06	13:00
F42096-1	1,2-Dichloroethane-D4	17060-07-0	SW846 8260B	101		%			10	120359-DW-001	12-Jul-06	13:00

(a) Petroleum hydrocarbon pattern begins before C10 and extends beyond C28.
(b) Elevated RL/MDL due to CRIA exceeding acceptance criteria.
Found 0 results exceeding regulatory limits.
** Indicates result outside regulatory limits.
* Regulatory limits listed in this document have been obtained from the lastest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.

SECTION 2.0
CONFIRMATION
SAMPLING

SECTION 2.1
AREA A CONFIRMATION SAMPLING

✓ - indicates result is ≤ to screening value

○ - indicates result is > screening value

Screening values

Arsenic 36.2 mg/kg
TCE 120 ug/kg

SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

The results shown below may still require additional laboratory review and are subject to change. Actions taken based on these results are the responsibility of the data user.

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F200139 **Date Reported:** 6/23/06

PARAMETER		RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD
Client Sample ID: S57A~~B~~CSEW 0110					
Sample #: 001 Date Sampled: 06/19/06 08:30 Date Received: 06/20/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					Reviewed
Arsenic	✓	11.6	1.1	mg/kg	SW846 6010B
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids		93.8	1.0	%	MCAWW 160.3 MOD
Client Sample ID: S57AADSEW 0110					
Sample #: 002 Date Sampled: 06/19/06 08:30 Date Received: 06/20/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	✓	32	5.7	ug/kg	SW846 8260B
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids		92.8	1.0	%	MCAWW 160.3 MOD
Client Sample ID: S57A~~B~~CSEW 0210					
Sample #: 003 Date Sampled: 06/19/06 08:45 Date Received: 06/20/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					Reviewed
Arsenic	✓	3.7	1.1	mg/kg	SW846 6010B
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids		92.6	1.0	%	MCAWW 160.3 MOD

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SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

The results shown below may still require additional laboratory review and are subject to change. Actions taken based on these results are the responsibility of the data user.

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F200139 **Date Reported:** 6/23/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57AADSEW 0210					
Sample #: 004 Date Sampled: 06/19/06 08:45 Date Received: 06/20/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	4.0 J	6.9	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
J Estimated result. Result is less than RL.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	86.6	1.0	%	MCAWW 160.3 MOD	
Client Sample ID: S57A~~B~~ACSEW 0310					
Sample #: 005 Date Sampled: 06/19/06 09:05 Date Received: 06/20/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					Reviewed
Arsenic	38.6	1.1	mg/kg	SW846 6010B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	90.7	1.0	%	MCAWW 160.3 MOD	
Client Sample ID: S57AADSEW 0310					
Sample #: 006 Date Sampled: 06/19/06 09:05 Date Received: 06/20/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	62	4.9	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	91.5	1.0	%	MCAWW 160.3 MOD	

(Continued on next page)

SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

The results shown below may still require additional laboratory review and are subject to change. Actions taken based on these results are the responsibility of the data user.

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F200139 **Date Reported:** 6/23/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57ABCSEW 0410					
Sample #: 007 Date Sampled: 06/19/06 09:30 Date Received: 06/20/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					Reviewed
Arsenic	**6.5**	**1.1**	**mg/kg**	**SW846 6010B**	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**89.6**	**1.0**	**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57AADSEW 0410					
Sample #: 008 Date Sampled: 06/19/06 09:30 Date Received: 06/20/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	**5.3 J**	**6.0**	**ug/kg**	**SW846 8260B**	
Results and reporting limits have been adjusted for dry weight.					
J Estimated result. Result is less than RL.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**87.9**	**1.0**	**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57AACSEF 0110					
Sample #: 009 Date Sampled: 06/19/06 09:40 Date Received: 06/20/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					Reviewed
Arsenic	**20.6**	**1.2**	**mg/kg**	**SW846 6010B**	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**84.7**	**1.0**	**%**	**MCAWW 160.3 MOD**	

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SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

The results shown below may still require additional laboratory review and are subject to change. Actions taken based on these results are the responsibility of the data user.

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F200139 **Date Reported:** 6/23/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57AADSEF 0110					
Sample #: 010 Date Sampled: 06/19/06 09:40 Date Received: 06/20/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene ✓	21	5.2	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	87.1	1.0	%	MCAWW 160.3 MOD	
Client Sample ID: S57AACSEF 0210					
Sample #: 011 Date Sampled: 06/19/06 09:50 Date Received: 06/20/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					Reviewed
Arsenic ✓	7.4	1.2	mg/kg	SW846 6010B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	84.1	1.0	%	MCAWW 160.3 MOD	
Client Sample ID: S57AADSEF 0210					
Sample #: 012 Date Sampled: 06/19/06 09:50 Date Received: 06/20/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene ✓	17	5.2	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	82.5	1.0	%	MCAWW 160.3 MOD	

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SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

The results shown below may still require additional laboratory review and are subject to change. Actions taken based on these results are the responsibility of the data user.

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F200139 **Date Reported:** 6/23/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57AADSEF 0310					
Sample #: 013 Date Sampled: 06/19/06 10:00 Date Received: 06/20/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	150	6.2	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	69.1	1.0	%	MCAWW 160.3 MOD	
Client Sample ID: S57AADSEF 0410					
Sample #: 014 Date Sampled: 06/19/06 10:10 Date Received: 06/20/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	✓ 34	5.9	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	76.7	1.0	%	MCAWW 160.3 MOD	
Client Sample ID: S57DUP01061906					
Sample #: 015 Date Sampled: 06/19/06 10:10 Date Received: 06/20/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					Reviewed
Arsenic	✓ 36.2	1.1	mg/kg	SW846 6010B	
Results and reporting limits have been adjusted for dry weight.					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	✓ 120	6.0	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					

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SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

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Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F200139 **Date Reported:** 6/23/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57DUP01061906					
Sample #: 015 Date Sampled: 06/19/06 10:10 Date Received: 06/20/06 Matrix: SOLID					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**89.9**	**1.0**	**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57TRP01061906					
Sample #: 016 Date Sampled: 06/19/06 10:10 Date Received: 06/20/06 Matrix: WATER					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND	1.0	ug/L	SW846 8260B	

SECTION 2.2
AREA B & C CONFIRMATION SAMPLING

ARSENIC PRG = 36.2 mg/kg

TCE PRG = 120 ug/kg

INDICATES ~~PRG EXCEEDANCE~~ RESULT IS GREATER THAN THE PRG.

SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

The results shown below may still require additional laboratory review and are subject to change. Actions taken based on these results are the responsibility of the data user.

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F140116 **Date Reported:** 6/16/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD
Client Sample ID: S57ABCSEF0110				
Sample #: 001 Date Sampled: 06/13/06 15:30 Date Received: 06/14/06 Matrix: SOLID				
Trace Inductively Coupled Plasma (ICP) Metals				In Review
Arsenic	**7.8**	**1.3**	**mg/kg**	**SW846 6010B**
Results and reporting limits have been adjusted for dry weight.				
Inorganic Analysis				Reviewed
Total Residue as Percent Solids	**76.7**		**%**	**MCAWW 160.3 MOD**
Client Sample ID: S57ABCSEW0110				
Sample #: 002 Date Sampled: 06/13/06 15:35 Date Received: 06/14/06 Matrix: SOLID				
Trace Inductively Coupled Plasma (ICP) Metals				In Review
Arsenic	**4.1**	**1.1**	**mg/kg**	**SW846 6010B**
Results and reporting limits have been adjusted for dry weight.				
Inorganic Analysis				Reviewed
Total Residue as Percent Solids	**87.2**		**%**	**MCAWW 160.3 MOD**
Client Sample ID: S57ABCSEW0210				
Sample #: 003 Date Sampled: 06/13/06 15:43 Date Received: 06/14/06 Matrix: SOLID				
Trace Inductively Coupled Plasma (ICP) Metals				In Review
Arsenic	**14.0**	**1.3**	**mg/kg**	**SW846 6010B**
Results and reporting limits have been adjusted for dry weight.				
Inorganic Analysis				Reviewed
Total Residue as Percent Solids	**77.9**		**%**	**MCAWW 160.3 MOD**

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SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

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Lot #: C6F140116

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Date Reported: 6/16/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57ABCSEW0310					
Sample #: 004 Date Sampled: 06/13/06 15:45 Date Received: 06/14/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					In Review
Arsenic	**15.5**	**1.2**	**mg/kg**	**SW846 6010B**	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**80.1**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57ABCSEW0410					
Sample #: 005 Date Sampled: 06/13/06 15:50 Date Received: 06/14/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					In Review
Arsenic	**3.8**	**2.5**	**mg/kg**	**SW846 6010B**	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**78.9**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57ACCSEF0110					
Sample #: 006 Date Sampled: 06/13/06 14:35 Date Received: 06/14/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					In Review
Arsenic	**63.9**	**1.2**	**mg/kg**	**SW846 6010B**	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**86.4**		**%**	**MCAWW 160.3 MOD**	

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STL Pittsburgh is a part of Severn Trent Laboratories, Inc.

SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

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Lot #: C6F140116

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Date Reported: 6/16/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57ACCSEW0110					
Sample #: 007 Date Sampled: 06/13/06 14:40 Date Received: 06/14/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					
Arsenic	**170**	**1.1**	**mg/kg**	**SW846 6010B**	In Review
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					
Total Residue as Percent Solids	**88.2**		**%**	**MCAWW 160.3 MOD**	Reviewed
Client Sample ID: S57ACCSEW0210					
Sample #: 008 Date Sampled: 06/13/06 14:42 Date Received: 06/14/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					
Arsenic	**47.1**	**1.2**	**mg/kg**	**SW846 6010B**	In Review
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					
Total Residue as Percent Solids	**85.6**		**%**	**MCAWW 160.3 MOD**	Reviewed
Client Sample ID: S57ACCSEW0310					
Sample #: 009 Date Sampled: 06/13/06 14:50 Date Received: 06/14/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					
Arsenic	**2.3**	**1.2**	**mg/kg**	**SW846 6010B**	In Review
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					
Total Residue as Percent Solids	**83.0**		**%**	**MCAWW 160.3 MOD**	Reviewed

(Continued on next page)

SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

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Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F140116 **Date Reported:** 6/16/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57ACCSEW0410					
Sample #: 010 Date Sampled: 06/13/06 14:56 Date Received: 06/14/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					In Review
Arsenic	**19.9**	**1.1**	**mg/kg**	**SW846 6010B**	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**87.1**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57ABDSEF0110					
Sample #: 011 Date Sampled: 06/13/06 15:50 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND	5.5	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**77.9**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57ABDSEF0210					
Sample #: 012 Date Sampled: 06/13/06 15:50 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND	4.4	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**89.5**		**%**	**MCAWW 160.3 MOD**	

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SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

The results shown below may still require additional laboratory review and are subject to change. Actions taken based on these results are the responsibility of the data user.

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F140116 **Date Reported:** 6/16/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57ABDSEW0110					
Sample #: 013 Date Sampled: 06/13/06 15:56 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND ✓	5.0	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**89.7**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57ABDSEW0210					
Sample #: 014 Date Sampled: 06/13/06 15:57 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	**37** ✓	**6.0**	**ug/kg**	**SW846 8260B**	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**76.9**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57ABDSEW0310					
Sample #: 015 Date Sampled: 06/13/06 16:00 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND ✓	6.3	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**74.2**		**%**	**MCAWW 160.3 MOD**	

(Continued on next page)

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SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

The results shown below may still require additional laboratory review and are subject to change. Actions taken based on these results are the responsibility of the data user.

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F140116 **Date Reported:** 6/16/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57ABDSEW0410					
Sample #: 016 Date Sampled: 06/13/06 16:03 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND ✓	5.4	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**86.0**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57ACDSEF0110					
Sample #: 017 Date Sampled: 06/13/06 15:05 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND ✓	5.2	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**87.0**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57ACDSEF0210					
Sample #: 018 Date Sampled: 06/13/06 15:08 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND ✓	5.0	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**84.9**		**%**	**MCAWW 160.3 MOD**	

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SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

The results shown below may still require additional laboratory review and are subject to change. Actions taken based on these results are the responsibility of the data user.

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F140116 **Date Reported:** 6/16/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57ACDSEW0110					
Sample #: 019 Date Sampled: 06/13/06 15:13 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND ✓	4.3	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**90.6**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57ACDSEW0210					
Sample #: 020 Date Sampled: 06/13/06 15:18 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND ✓	4.5	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**87.3**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57ACDSEW0310					
Sample #: 021 Date Sampled: 06/13/06 15:20 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND ✓	4.9	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**86.5**		**%**	**MCAWW 160.3 MOD**	

(Continued on next page)

SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

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Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F140116 **Date Reported:** 6/16/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57ACDSEW0410					
Sample #: 022 Date Sampled: 06/13/06 15:25 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND ✓	4.9	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**91.4**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57DUP01061206					
Sample #: 023 Date Sampled: 06/13/06 15:52 Date Received: 06/14/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					In Review
Arsenic	**3.4** ✓	**1.3**	**mg/kg**	**SW846 6010B**	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**78.5**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: S57DUP01061206					
Sample #: 024 Date Sampled: 06/13/06 16:03 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND ✓	5.1	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**82.9**		**%**	**MCAWW 160.3 MOD**	

(Continued on next page)

SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

The results shown below may still require additional laboratory review and are subject to change. Actions taken based on these results are the responsibility of the data user.

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F140116 **Date Reported:** 6/16/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57DUP01061206					
Sample #: 025 Date Sampled: 06/13/06 15:25 Date Received: 06/14/06 Matrix: SOLID					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND ✓	5.3	ug/kg	SW846 8260B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	**93.8**		**%**	**MCAWW 160.3 MOD**	
Client Sample ID: TRIP BLANK					
Sample #: 026 Date Sampled: 06/13/06 15:25 Date Received: 06/14/06 Matrix: WATER					
Volatile Organics by GC/MS					Reviewed
Trichloroethene	ND ✓	1.0	ug/L	SW846 8260B	

STL Pittsburgh is a part of Severn Trent Laboratories, Inc.

SECTION 2.3
AREA B CONFIRMATION SAMPLING
(TRY #2)

Clean up Goal for Arsenic = 36.2 mg/kg

Indicates arsenic exceeds cleanup goal.

SEVERN TRENT LABORATORIES, INC.

PRELIMINARY DATA SUMMARY

The results shown below may still require additional laboratory review and are subject to change. Actions taken based on these results are the responsibility of the data user.

Tetra Tech NUS Inc
NSF Indian Head, MD
Project Number: CTO005

Lot #: C6F230117 **Date Reported:** 6/26/06

PARAMETER	RESULT	REPORTING LIMIT	UNITS	ANALYTICAL METHOD	
Client Sample ID: S57ACCSEW0111					
Sample #: 001 Date Sampled: 06/21/06 11:40 Date Received: 06/23/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					Reviewed
Arsenic	87.1	1.1	mg/kg	SW846 6010B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	88.2		%	MCAWW 160.3 MOD	
Client Sample ID: S57ACCSEW0211					
Sample #: 002 Date Sampled: 06/21/06 11:35 Date Received: 06/23/06 Matrix: SOLID					
Trace Inductively Coupled Plasma (ICP) Metals					Reviewed
Arsenic	111	1.2	mg/kg	SW846 6010B	
Results and reporting limits have been adjusted for dry weight.					
Inorganic Analysis					Reviewed
Total Residue as Percent Solids	84.1		%	MCAWW 160.3 MOD	

STL Pittsburgh is a part of Severn Trent Laboratories, Inc.

SECTION 3.0
SITE 57 AREAS A, B, & C
INDIAN HEAD, MARYLAND
SHAW PROJECT NO. 120359, T.O. 025
ANALYTICAL REPORTS

SECTION 3.1
WASTE CHARACTERIZATION
FINAL REPORT
(SEPARATE ON CD)

SECTION 3.2
DECONTAMINATION WATER
FINAL REPORT
(SEPARATE ON CD)

APPENDIX D

HEALTH AND SAFETY DOCUMENTATION
INTERIM REMOVAL ACTION AT
SITE 57-BUILDING 292 TCE CONTAMINATION
NAVAL SUPPORT FACILITY INDIAN HEAD
INDIAN HEAD, MARYLAND
CONTRACT NO. N62470-03-D-4402
TASK ORDER NO. 025

Prepared for:
Naval Facilities Engineering Command Washington
1314 Harwood Street, S.E.
Washington Navy Yard, DC 20374-5018

Prepared by:

Field Support Services, Inc.
6303 Ivy Lane, Suite 800
Greenbelt, Maryland 20770

and

Shaw Environmental, Inc.
500 E. Main Street, Suite 1630
Norfolk, Virginia 23510

September 2006
Project No. 120359

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SECTION 1.0
INSPECTION FORMS

Shaw
SHAW E & I, Inc.

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : 120359 SITE 57 INDIAN HEAD, MD

Date : 6-1-06

BUSINESS LINE : DEPT of NAVY - LANTDIV PROJECT NAME/NUMBER : 120359
PROGRAM MANAGER : P. KARMAZINSKI - FSSI PROJECT MANAGER : STEVE CARRIERE
GENERAL PROJECT DESCRIPTION : TCE CONTAMINATION REMOVAL ACTION
SITE ACTIVITIES AT TIME OF INSPECTION : INSTALLATION of SILT & HI-VIS FENCING @ SITE 57, AREAS A, B, C, LAY-OUT of MATERIAL YARD

INTERVIEWED EMPLOYEE : TIM COLLINS
SAFETY ISSUE : NONE
CORRECTIVE ACTION :

ASSIGNED TO : FOLLOW-UP DATE :
CORRECTION VERIFIED BY: DATE :

INTERVIEWED EMPLOYEE : STEVE SMITH - FSSI EMPLOYEE
SAFETY ISSUE : NONE
CORRECTIVE ACTION :

ASSIGNED TO : FOLLOW-UP DATE :
CORRECTION VERIFIED BY: DATE :

INSPECTION COMPLETED BY : DATE : 6-1-06

HEALTH AND SAFETY REVIEW BY : (WRIGHT) DATE : 6-1-06

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : INDIAN HEAD SITE 57 **DATE :** 6-1-06

		YES	NO	N/A
FIRST AID				
1	Are first aid kit locations identified & accessible?	✓		
2	Are emergency eye wash/safety showers available & inspected monthly?	✓		
3	Are first aid kits inspected weekly?	✓		
4	Is a qualified first aid/CPR provider on site?	✓		
PERSONAL PROTECTION EQUIPMENT				
1	Have levels of personnel protection been established?	✓		
2	Are respirators decontaminated, inspected & stored according to standard procedures?			✓
3	Have employees been fit-tested?			✓
4	Is defective personal protection equipment tagged & taken out of service?			✓
5	Does compressed breathing air meet CGA "D" minimum?			✓
6	Are there sufficient sizes & quantities of protective equipment?			✓
7	At a minimum, are employees utilizing safety glasses, hard hats & steel toe boots?	✓		
FIRE PREVENTION				
1	Are employees smoking only in designated outdoor areas?	✓		
2	Are fire lanes established and maintained?			✓
3	Are flammable liquid dispensing systems bonded?	✓		
4	Are approved safety cans available for storage of flammable liquids?	✓		
5	Has the local fire department been contacted?	✓		
6	Are fire extinguishers available & inspected monthly?	✓		
7	Are flammables and combustibles properly stored?	✓		
8	Are flammable storage cabinets available & used when needed?			✓
AIR MONITORING				
1	Is required air monitoring being conducted?	✓		
2	Are air monitoring instruments calibrated daily?	✓		
3	Are air monitoring logs up to date?	✓		
4	Are instrument user manuals available?	✓		
5	Are instruments being maintained?	✓		
6	Are employees notified of personal sampling results within 5 days of receipt?	✓		
WELDING AND CUTTING				
1	Are fire extinguishers present at welding & cutting operations?	✓		
2	Are confined spaces evaluated prior to and during cutting & welding operations?			✓
3	Have Hot Work Permits been completed?			✓
4	Are proper helmets, goggles, aprons & gloves available for welding and cutting operations?			✓
5	Are welding machines properly grounded?			✓
6	Are oxygen and fuel gas cylinders stored a minimum of 20 feet apart?			✓
7	Are only trained personnel permitted to operate welding & cutting equipment?			✓
8	Are gas cylinders transported in a secured vertical position with caps in place?			✓

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : Site 57 **DATE :** 6/1/06

		YES	NO	N/A
HAND AND POWER TOOLS				
1	Are defective hand & power tools tagged and taken out of service?	✓		
2	Is eye protection available and used when operating power tools?	✓		
3	Are guards and safety devices in place on power tools?	✓		
4	Are power tools inspected before each use?	✓		
5	Are non-sparking tools available when necessary?			✓
6	Is the correct tool being used for the job?	✓		
MOTOR VEHICLES				
1	Are vehicles regularly inspected?	✓		
2	Are personnel licensed for the vehicles they operate?	✓		
3	Are unsafe vehicles tagged and reported to the supervisor?	✓		
4	Is vehicle's safety equipment operating properly?	✓		
5	Are loads secure?	✓		
6	Are vehicle occupants using seat belts?	✓		
7	Are current insurance cards and blank accident report forms located in vehicles?	✓		
EMERGENCY PLANS				
1	Are emergency telephone numbers posted?	✓		
2	Have emergency escape routes been designated?	✓		
3	Are employees familiar with the emergency signal?	✓		
4	Has the emergency route to the hospital been established & posted?	✓		
5	Is a vehicle on site that can transport injured employees to the hospital?	✓		
MATERIALS HANDLING				
1	Are the materials stacked and stored to prevent sliding and collapsing?			
2	Are tripping hazards identified?			
3	Are semi-trailers chocked?			
4	Are fixed jacks used under semi-trailers?			
5	Are riders prohibited on materials handling equipment?			
6	Are approved manlifts provided for the lifting of personnel?			
7	Are personnel in manlifts wearing approved fall protection devices?			
FIRE PROTECTION				
1	Has a fire alarm system been established?	✓		
2	Do employees know the location and use of all fire extinguishers?	✓		
3	Are the fire extinguisher locations posted?	✓		
4	Are combustible materials segregated from open flames?	✓		
5	Have fire extinguishers been professionally inspected during the last year?	✓		
6	Are fire extinguishers visually inspected monthly?	✓		
ELECTRICAL				
1	Is electrical equipment and wiring properly guarded and maintained in good conditions?	✓		
2	Are extension cords kept out of wet areas?	✓		
3	Is damaged electrical equipment tagged and taken out of service?	✓		
4	Have underground electrical lines been identified by proper authorities?			✓
5	Has a lockout/tagout system been established?	✓		
6	Are GFC's being used on all temporary electrical systems and as needed?	✓		

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : Site 57 **DATE :** 6/1/06

		YES	NO	N/A
ELECTRICAL (continued)				
7	Are extension cords being inspected daily (I.e., group in place, no unapproved splices)	✓		
8	Are warning signs exhibited on high voltage equipment (250v or greater) ?			✓
9	Is adequate distance maintained from overhead electrical lines?	✓		
10	Are switches, circuit breakers & switchboards installed in wet locations enclosed in weatherproof enclosures?	✓		
CRANES AND RIGGING				
1	Are cranes inspected daily prior to use?			✓
2	Are cranes swing areas barricaded or marked?			✓
3	Is all rigging equipment tagged with an identification number & rated capacity?			✓
4	Is rigging equipment inspection documented?			✓
5	Are slings, chains and rigging inspected before each use?			✓
6	Are damaged slings, chains and rigging tagged & taken out of service?			✓
7	Are slings padded or protected from sharp corners?			✓
8	Do employees keep clear of suspended loads?			✓
9	Are rated load capacities and special hazard warnings posted on crane?			✓
10	Are the records of annual crane inspection available?			✓
11	Has accessible areas within the swing radius of the rear of the crane been barricaded?			✓
12	Do crane operators have required training/certifications?			✓
COMPRESSED GAS CYLINDERS				
1	Are breathing air cylinders charged only to prescribed pressures?			✓
2	Are like cylinders segregated and stored in well ventilated areas?			✓
3	Is smoking prohibited in cylinder storage areas?			✓
4	Are cylinders stored secured and upright?			✓
5	Are cylinder protected from snow, rain, etc. ?			✓
6	Are cylinder caps in place before cylinders are moved?			✓
7	Are fuel gas and oxygen cylinders stored a minimum of 20 feet apart?			✓
8	Are propane cylinders stored and used only outside of buildings?			✓
SCAFFOLDING				
1	Is scaffolding placed on a flat, firm surface?			✓
2	Are scaffold plants free of mud, ice, grease, etc. ?			✓
3	Is scaffolding inspected before each use?			✓
4	Are defective scaffold parts taken out of service?			✓
5	Have employees completed scaffold user training?			✓
6	On scaffolds where platforms are overlapped, is planking a minimum of 12 inches?			✓
7	Does scaffold planking extend over end supports between 6 to 18 inches			✓
8	Are employees restricted from working on scaffolds during storms & high winds?			✓
9	Are all pins in place and wheels chocked?			✓
10	Is required perimeter guarding (top & mid rails, toe board) present?			✓
11	Has a competent person been designated to oversee scaffold construction?			✓
12	Are employees prohibited from moving mobile scaffold horizontally while employees are on them?			✓
13	Are all scaffold components manufactured by the same company?			✓

PROJECT NAME : SITE 57 **DATE :** 6-1-06

		YES	NO	N/A
WALKING AND WORKING SURFACES				
1	Are ladders regularly inspected?	✓		
2	Are accessways, stairways, ramps and ladders clean of ice, mud, snow & debris?	✓		
3	Are ladders being used in a safe manner?	✓		
4	Are ladders kept out of passageways, doors or driveways?	✓		
5	Are broken or damaged ladders tagged & taken out of service?	✓		
6	Are metal ladders prohibited in electrical service?	✓		
7	Are stairways and floor openings covered?			✓
8	Are safety feet installed on straight and extension ladders?	✓		
9	Is general housekeeping being maintained?	✓		
10	Are ladders tied off?	✓		
11	Are handrails and siderails installed along the unprotected sides of stairways having 4 or more risers or rising more than 30 inches?	✓		
SITE SAFETY PLAN				
1	Is a site safety plan available on site or accessible to all employees?	✓		
2	Does the safety plan accurately reflect site conditions and tasks?	✓		
3	Have potential hazards been described to employees on site?	✓		
4	Is there a designated safety official on site?	✓		
5	Have all employees signed the safety plan acknowledgment form?	✓		
SITE POSTERS				
1	Are the following posters displayed in a prominent and accessible area?			
	A Minimum Wage	✓		
	B OSHA Job Protection	✓		
	C Equal Employment Opportunity	✓		
2	Are all required state-specific posters displayed?	✓		
SITE CONTROL				
1	Are work zones clearly marked?	✓		
2	Are support trailers located to minimize exposure from a potential release?	✓		
3	Are support trailers accessible for approach by emergency vehicles?	✓		
4	Is the site properly secured during and after work hours?	✓		
5	Is an exclusion zone sign-in/sign-out log maintained?			✓
6	Are only employees with current training & physicals permitted in exclusion zone?	✓		
HEAVY EQUIPMENT				
1	Is heavy equipment inspected as prescribed by the manufacturer?	✓		
2	Is defective heavy equipment tagged and taken out of service?	✓		
3	Are project roads & structures inspected for load capacities & proper clearances?	✓		
4	Is heavy equipment shut down for fueling and maintenance?	✓		
5	Are backup alarms installed and working on mobile equipment?	✓		
6	Have qualified equipment operators been designated?	✓		
7	Are riders prohibited on heavy equipment?	✓		
8	Are guards and safety appliances in place and used?	✓		
9	Are operators using the "THREE POINT" system when mounting/dismounting equipment?	✓		

PROJECT NAME : Site 57 **DATE :** 6-1-06

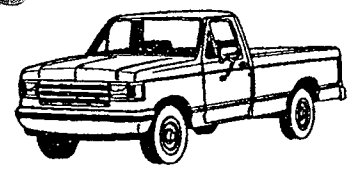
		YES	NO	N/A
EXCAVATION				
1	Has a "competent person" been designated to oversee excavation activities?	✓		
2	Prior to opening excavations, are utilities located and marked?	✓		
3	Has a professional engineer evaluated all excavations greater than 20 feet deep?			✓
4	Is there rescue equipment on site & accessible to the excavation area?			✓
5	Is excavated material placed a minimum of 24 inches from the excavation?	✓		
6	Are the sides of the excavation sloped or shored to prevent cave in?			✓
7	Have excavations greater than 4 feet deep been monitored for hazardous atmospheres(I.e. LEL/O2 deficiency)?	✓		✓
8	Are ladders or ramps used in excavations over 4 feet deep?	✓		✓
9	Are means of egress available so as to require no more than 25 feet of lateral travel?	✓		
10	Are barriers, I.e., guardrails or fences, placed around excavations near pedestrian or vehicle thoroughfares?	✓		
11	Is excavation inspected daily by competent persons and documented?	✓		
CONFINED SPACED				
1	Have employees been trained in the hazards of confined space?			
2	Are confined space permits posted at the entrance to confined spaces?			
3	Is a copy of the confined space entry procedure available?			
4	Has a rescue plan been established?			
5	Is an entry supervisor present at each permit-required entry?			
6	Are required extraction/fall protection devices being used?			
DECONTAMINATION				
1	Are decontamination stations set up on site?	✓		
2	Is decontamination water properly contained and disposed of?	✓		
3	Are all pieces of equipment inspected for proper decontamination before leaving the site?	✓		
4	Are shin/metatarsal guards being used during power washing activities?	✓		
HAZARD COMMUNICATION				
1	Is there a copy of the HAZCOM procedure on site?	✓		
2	Are there MSDS's for required materials/chemicals present on site?	✓		
3	Are all containers properly labeled, as to content; hazard?	✓		
4	Have employees been trained in accordance with the HAZCOM procedure?	✓		
5	Do employees (including subcontractors) know and understand the effects of exposure from the chemicals on site?	✓		
6	Have all personnel signed the HAZCOM acknowledgment form?	✓		
7	Is there an update list of chemicals maintained on site?	✓		
TRAINING				
1	Are tailgate safety meetings being conducted daily?	✓		
2	Are current training/medical records maintained on site?	✓		
DOCUMENTATION				
1	Is an OSHA ~~200~~ 300 Log maintained on site & posted during the month of February?	✓		
2	Are accident report forms available?	✓		
3	Is a copy of health & safety policy and procedures available on site?	✓		

PROJECT SAFETY INSPECTION REPORT

PROJECT :Site 57 Project # 120359 **Date** : 6-1-06

ALL NEGATIVE RESPONSES	CORRECTIVE ACTION	ASSIGNED TO	DATE ASSIGNED	DATE COMPLETED	VERIFIED BY
NO	ISSUES				

DESCRIBE POSITIVE SAFETY OBSERVATIONS
START OF FIELD WORK / SET-UP IN EARLY STAGES. SITE IS WELL DESIGNED, FIELD CREW ALERT IN HIGHLY CONTROLLED AREA.
LACKING COMMUNICATIONS IS A CONCERN. VERY BAD SIGNAL AREA / NO SERVICE.
WILL ADDRESS ANY CONCERNS AS THEY ARISE.
H & S



Shaw Environmental and Infrastructure, Inc — Equipment Group

WEEKLY VEHICLE INSPECTION

UNIT NO: 100191
UNIT MILES: 42302
INSPECTED BY: Ed Abney
EMP. NUMBER: 439515

WEEK ENDING: 6-2-06
CURRENT JOB NO: 120359
FUEL FRONT: F
FUEL REAR: NA

For Authorized Repairs On Donlen Vehicles, Call 1-800-323-1483

RETAIN THESE FORMS ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL

N / A = NOT APPLICABLE C = COMMENTS O = OKAY N = NEEDS ATTENTION

O Unit Washed, Interior Cleaned. Yes / (No)
O Unit Fueled (Yes) / No
O Air Conditioner / Heater
O Battery / Starter / Horn
O Lights, Head-Tail-Turn-Stop-Emer.
O Ins. Card & Accident Report Kit
O Current Registration, Plates
O Service Brakes
O Parking Brakes
O Windshield Wipers / Washers
O Mirrors-Inside-Outside
O Engine Oil, Oil Pressure

O Transmission Oil & Drive Line
O Radiator / Cooling System
O Exhaust / Muffler
O Front Axle / Steering
O Suspension System
O Spare Tire
O Jack & Lug Wrench
O Tires / Wheels / Rims
O Frame / Bumpers
O Coupling Devices
O Trailer Electrical Connector
O Other, Please Enter Comments Below

WAS UNIT SERVICED Y / (N) DATE MILES

COMMENTS:

INSPECTORS SIGNATURE: Ed Abney DATE: 6-2-06

N-7

Shaw™
SHAW E & I, Inc.
Indian Head, Md

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : SITE 57 **Date :** 6-12-06

BUSINESS LINE : FEDERAL **PROJECT NAME/NUMBER :** 120359
PROGRAM MANAGER : **PROJECT MANAGER :** S. CARRIERE
GENERAL PROJECT DESCRIPTION :
SITE ACTIVITIES AT TIME OF INSPECTION : EXCAVATING AREA A & C
TRAFFIC CONTROL

INTERVIEWED EMPLOYEE : TOM
SAFETY ISSUE : NONE
CORRECTIVE ACTION :

ASSIGNED TO : **FOLLOW-UP DATE :**
CORRECTION VERIFIED BY: **DATE :**

INTERVIEWED EMPLOYEE :
SAFETY ISSUE :
CORRECTIVE ACTION :

ASSIGNED TO : **FOLLOW-UP DATE :**
CORRECTION VERIFIED BY: **DATE :**

INSPECTION COMPLETED BY : CANO HERNANDEZ **DATE :** 6-12-06
Cano Hernandez 6-12-06

HEALTH AND SAFETY REVIEW BY : Jim WRIGHT **DATE :** 6-12-06
FEDERAL SSO

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : Site 57 **DATE :** 6-12-06

		YES	NO	N/A
FIRST AID				
1	Are first aid kit locations identified & accessible?			
2	Are emergency eye wash/safety showers available & inspected monthly?			
3	Are first aid kits inspected weekly?			
4	Is a qualified first aid/CPR provider on site?			
PERSONAL PROTECTION EQUIPMENT				
1	Have levels of personnel protection been established?	X		
2	Are respirators decontaminated, inspected & stored according to standard procedures?			X
3	Have employees been fit-tested?			X
4	Is defective personal protection equipment tagged & taken out of service?	X		
5	Does compressed breathing air meet CGA "D" minimum?			X
6	Are there sufficient sizes & quantities of protective equipment?			X
7	At a minimum, are employees utilizing safety glasses, hard hats & steel toe boots?	X		
FIRE PREVENTION				
1	Are employees smoking only in designated outdoor areas?	X		
2	Are fire lanes established and maintained?	X		
3	Are flammable liquid dispensing systems bonded?	X		
4	Are approved safety cans available for storage of flammable liquids?	X		
5	Has the local fire department been contacted?	X		
6	Are fire extinguishers available & inspected monthly?	X		
7	Are flammables and combustibles properly stored?			X
8	Are flammable storage cabinets available & used when needed?			X
AIR MONITORING				
1	Is required air monitoring being conducted?	X		
2	Are air monitoring instruments calibrated daily?	X		
3	Are air monitoring logs up to date?	X		
4	Are instrument user manuals available?	X		
5	Are instruments being maintained?	X		
6	Are employees notified of personal sampling results within 5 days of receipt?	X		
WELDING AND CUTTING				
1	Are fire extinguishers present at welding & cutting operations?			
2	Are confined spaces evaluated prior to and during cutting & welding operations?			
3	Have Hot Work Permits been completed?			
4	Are proper helmets, goggles, aprons & gloves available for welding and cutting operations?			
5	Are welding machines properly grounded?			
6	Are oxygen and fuel gas cylinders stored a minimum of 20 feet apart?			
7	Are only trained personnel permitted to operate welding & cutting equipment?			
8	Are gas cylinders transported in a secured vertical position with caps in place?			

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : SITE 57 **DATE :** 6-12-06

		YES	NO	N/A
HAND AND POWER TOOLS				
1	Are defective hand & power tools tagged and taken out of service?			
2	Is eye protection available and used when operating power tools?			
3	Are guards and safety devices in place on power tools?			
4	Are power tools inspected before each use?			
5	Are non-sparking tools available when necessary?			
6	Is the correct tool being used for the job?			
MOTOR VEHICLES				
1	Are vehicles regularly inspected?			
2	Are personnel licensed for the vehicles they operate?			
3	Are unsafe vehicles tagged and reported to the supervisor?			
4	Is vehicle's safety equipment operating properly?			
5	Are loads secure?			
6	Are vehicle occupants using seat belts?			
7	Are current insurance cards and blank accident report forms located in vehicles?			
EMERGENCY PLANS				
1	Are emergency telephone numbers posted?			
2	Have emergency escape routes been designated?			
3	Are employees familiar with the emergency signal?			
4	Has the emergency route to the hospital been established & posted?			
5	Is a vehicle on site that can transport injured employees to the hospital?			
MATERIALS HANDLING				
1	Are the materials stacked and stored to prevent sliding and collapsing?			
2	Are tripping hazards identified?			
3	Are semi-trailers chocked?			
4	Are fixed jacks used under semi-trailers?			
5	Are riders prohibited on materials handling equipment?			
6	Are approved manlifts provided for the lifting of personnel?			
7	Are personnel in manlifts wearing approved fall protection devices?			
FIRE PROTECTION				
1	Has a fire alarm system been established?			
2	Do employees know the location and use of all fire extinguishers?			
3	Are the fire extinguisher locations posted?			
4	Are combustible materials segregated from open flames?			
5	Have fire extinguishers been professionally inspected during the last year?			
6	Are fire extinguishers visually inspected monthly?			
ELECTRICAL				
1	Is electrical equipment and wiring properly guarded and maintained in good conditions?			
2	Are extension cords kept out of wet areas?			
3	Is damaged electrical equipment tagged and taken out of service?			
4	Have underground electrical lines been identified by proper authorities?			
5	Has a lockout/tagout system been established?			
6	Are GFC's being used on all temporary electrical systems and as needed?			

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : SITE 57 **DATE :** 6-12-06

		YES	NO	N/A
ELECTRICAL (continued)				
7	Are extension cords being inspected daily (I.e., group in place, no unapproved splices)			
8	Are warning signs exhibited on high voltage equipment (250v or greater) ?			
9	Is adequate distance maintained from overhead electrical lines?			
10	Are switches, circuit breakers & switchboards installed in wet locations enclosed in weatherproof enclosures?			
CRANES AND RIGGING				
1	Are cranes inspected daily prior to use?			
2	Are cranes swing areas barricaded or marked?			
3	Is all rigging equipment tagged with an identification number & rated capacity?			
4	Is rigging equipment inspection documented?			
5	Are slings, chains and rigging inspected before each use?			
6	Are damaged slings, chains and rigging tagged & taken out of service?			
7	Are slings padded or protected from sharp corners?			
8	Do employees keep clear of suspended loads?			
9	Are rated load capacities and special hazard warnings posted on crane?			
10	Are the records of annual crane inspection available?			
11	Has accessible areas within the swing radius of the rear of the crane been barricaded?			
12	Do crane operators have required training/certifications?			
COMPRESSED GAS CYLINDERS				
1	Are breathing air cylinders charged only to prescribed pressures?			
2	Are like cylinders segregated and stored in well ventilated areas?			
3	Is smoking prohibited in cylinder storage areas?			
4	Are cylinders stored secured and upright?			
5	Are cylinder protected from snow, rain, etc. ?			
6	Are cylinder caps in place before cylinders are moved?			
7	Are fuel gas and oxygen cylinders stored a minimum of 20 feet apart?			
8	Are propane cylinders stored and used only outside of buildings?			
SCAFFOLDING				
1	Is scaffolding placed on a flat, firm surface?			
2	Are scaffold plants free of mud, ice, grease, etc. ?			
3	Is scaffolding inspected before each use?			
4	Are defective scaffold parts taken out of service?			
5	Have employees completed scaffold user training?			
6	On scaffolds where platforms are overlapped, is planking a minimum of 12 inches?			
7	Does scaffold planking extend over end supports between 6 to 18 inches			
8	Are employees restricted from working on scaffolds during storms & high winds?			
9	Are all pins in place and wheels chocked?			
10	Is required perimeter guarding (top & mid rails, toe board) present?			
11	Has a competent person been designated to oversee scaffold construction?			
12	Are employees prohibited from moving mobile scaffold horizontally while employees are on them?			
13	Are all scaffold components manufactured by the same company?			

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : Site 57 **DATE :** 6-12-06

		YES	NO	N/A
EXCAVATION				
1	Has a "competent person" been designated to oversee excavation activities?	✓		
2	Prior to opening excavations, are utilities located and marked?	✓		
3	Has a professional engineer evaluated all excavations greater than 20 feet deep?	✓		
4	Is there rescue equipment on site & accessible to the excavation area?	✓		
5	Is excavated material placed a minimum of 24 inches from the excavation?	✓		
6	Are the sides of the excavation sloped or shored to prevent cave in?	✓		
7	Have excavations greater than 4 feet deep been monitored for hazardous atmospheres(I.e. LEL/O2 deficiency)?	✓		
8	Are ladders or ramps used in excavations over 4 feet deep?	✓		
9	Are means of egress available so as to require no more than 25 feet of lateral travel?	✓		
10	Are barriers, I.e., guardrails or fences, placed around excavations near pedestrian or vehicle thoroughfares?	✓		
11	Is excavation inspected daily by competent persons and documented?	✓		
CONFINED SPACED				
1	Have employees been trained in the hazards of confined space?			✓
2	Are confined space permits posted at the entrance to confined spaces?			✓
3	Is a copy of the confined space entry procedure available?			✓
4	Has a rescue plan been established?			✓
5	Is an entry supervisor present at each permit-required entry?			✓
6	Are required extraction/fall protection devices being used?			✓
DECONTAMINATION				
1	Are decontamination stations set up on site?	✓		
2	Is decontamination water properly contained and disposed of?	✓		
3	Are all pieces of equipment inspected for proper decontamination before leaving the site?	✓		
4	Are shin/metatarsal guards being used during power washing activities?	✓		
HAZARD COMMUNICATION				
1	Is there a copy of the HAZCOM procedure on site?	✓		
2	Are there MSDS's for required materials/chemicals present on site?	✓		
3	Are all containers properly labeled, as to content; hazard?	✓		
4	Have employees been trained in accordance with the HAZCOM procedure?	✓		
5	Do employees (including subcontractors) know and understand the effects of exposure from the chemicals on site?	✓		
6	Have all personnel signed the HAZCOM acknowledgment form?	✓		
7	Is there an update list of chemicals maintained on site?	✓		
TRAINING				
1	Are tailgate safety meetings being conducted daily?	✓		
2	Are current training/medical records maintained on site?	✓		
DOCUMENTATION				
1	Is an OSHA 200 Log maintained on site & posted during the month of February?	✓		
2	Are accident report forms available?	✓		
3	Is a copy of health & safety policy and procedures available on site?	✓		

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : SITE 57 **DATE :** 6-12-06

		YES	NO	N/A
WALKING AND WORKING SURFACES				
1	Are ladders regularly inspected?	✓		
2	Are accessways, stairways, ramps and ladders clean of ice, mud, snow & debris?	✓		
3	Are ladders being used in a safe manner?	✓		
4	Are ladders kept out of passageways, doors or driveways?	✓		
5	Are broken or damaged ladders tagged & taken out of service?	✓		
6	Are metal ladders prohibited in electrical service?	✓		
7	Are stairways and floor openings covered?	✓		
8	Are safety feet installed on straight and extension ladders?	✓		
9	Is general housekeeping being maintained?	✓		
10	Are ladders tied off?	✓		
11	Are handrails and siderails installed along the unprotected sides of stairways having 4 or more risers or rising more than 30 inches?	✓		
SITE SAFETY PLAN				
1	Is a site safety plan available on site or accessible to all employees?	✓		
2	Does the safety plan accurately reflect site conditions and tasks?	✓		
3	Have potential hazards been described to employees on site?	✓		
4	Is there a designated safety official on site?	✓		
5	Have all employees signed the safety plan acknowledgment form?	✓		
SITE POSTERS				
1	Are the following posters displayed in a prominent and accessible area?			
	A Minimum Wage	✓		
	B OSHA Job Protection	✓		
	C Equal Employment Opportunity	✓		
2	Are all required state-specific posters displayed?	✓		
SITE CONTROL				
1	Are work zones clearly marked?	✓		
2	Are support trailers located to minimize exposure from a potential release?	✓		
3	Are support trailers accessible for approach by emergency vehicles?	✓		
4	Is the site properly secured during and after work hours?	✓		
5	Is an exclusion zone sign-in/sign-out log maintained?	✓		
6	Are only employees with current training & physicals permitted in exclusion zone?	✓		
HEAVY EQUIPMENT				
1	Is heavy equipment inspected as prescribed by the manufacturer?	✓		
2	Is defective heavy equipment tagged and taken out of service?	✓		
3	Are project roads & structures inspected for load capacities & proper clearances?	✓		
4	Is heavy equipment shut down for fueling and maintenance?	✓		
5	Are backup alarms installed and working on mobile equipment?	✓		
6	Have qualified equipment operators been designated?	✓		
7	Are riders prohibited on heavy equipment?	✓		
8	Are guards and safety appliances in place and used?	✓		
9	Are operators using the "THREE POINT" system when mounting/dismounting equipment?	✓		

PROJECT SAFETY INSPECTION REPORT

PROJECT : 120359 Site 57 **Date :** 6-12-06

ALL NEGATIVE RESPONSES	CORRECTIVE ACTION	ASSIGNED TO	DATE ASSIGNED	DATE COMPLETED	VERIFIED BY
	No Issues				

DESCRIBE POSITIVE SAFETY OBSERVATIONS

HS. 308 is being followed
Hand Excavation where Know Lines
Proper PPE at All Time

S.S.
6-12-06

Shaw

Shaw Environmental and Infrastructure, Inc — Equipment Group

WEEKLY VEHICLE INSPECTION

UNIT NO: P8 - UR F150
UNIT MILES: 38582
INSPECTED BY: Tim Collins
EMP. NUMBER: 437766

WEEK ENDING: 6.16.06
CURRENT JOB NO:
FUEL FRONT: 3/4
FUEL REAR:

For Authorized Repairs On Donlen Vehicles, Call 1-800-323-1483

RETAIN THESE FORMS ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL

N / A = NOT APPLICABLE **C** = COMMENTS **O** = OKAY **N** = NEEDS ATTENTION

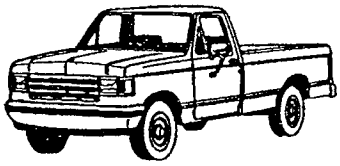
O	Unit Washed, Interior Cleaned. **Yes / No**	O	Transmission Oil & Drive Line
O	Unit Fueled **Yes / No**	O	Radiator / Cooling System
O	Air Conditioner / Heater	O	Exhaust / Muffler
O	Battery / Starter / Horn	O	Front Axle / Steering
O	Lights, Head-Tail-Turn-Stop-Emer.	O	Suspension System
O	Ins. Card & Accident Report Kit	O	Spare Tire
O	Current Registration, Plates	O	Jack & Lug Wrench
O	Service Brakes	O	Tires / Wheels / Rims
O	Parking Brakes	O	Frame / Bumpers
O	Windshield Wipers / Washers	O	Coupling Devices
O	Mirrors-Inside-Outside	O	Trailer Electrical Connector
O	Engine Oil, Oil Pressure	C	Other, Please Enter Comments Below

WAS UNIT SERVICED Y / N **DATE** **MILES**

COMMENTS: Misc. Dents, Scratches on truck body

INSPECTORS SIGNATURE: [signature] **DATE:**

Shaw



Shaw Environmental and Infrastructure, Inc — Equipment Group

WEEKLY VEHICLE INSPECTION

UNIT NO: 100191
UNIT MILES: 43067
INSPECTED BY: Tim Collins
EMP. NUMBER: 437766

WEEK ENDING: 6-16-06
CURRENT JOB NO:
FUEL FRONT: Full
FUEL REAR:

For Authorized Repairs On Donlen Vehicles, Call 1-800-323-1483

RETAIN THESE FORMS ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL

N / A = NOT APPLICABLE C = COMMENTS O = OKAY N = NEEDS ATTENTION

- N Unit Washed, Interior Cleaned. Yes / No
- O Unit Fueled Yes / No
- O Air Conditioner / Heater
- O Battery / Starter / Horn
- O Lights, Head-Tail-Turn-Stop-Emer.
- O Ins. Card & Accident Report Kit
- O Current Registration, Plates
- O Service Brakes
- O Parking Brakes
- O Windshield Wipers / Washers
- O Mirrors-Inside-Outside
- O Engine Oil, Oil Pressure
- O Transmission Oil & Drive Line
- O Radiator / Cooling System
- O Exhaust / Muffler
- O Front Axle / Steering
- O Suspension System
- O Spare Tire
- O Jack & Lug Wrench
- O Tires / Wheels / Rims
- O Frame / Bumpers
- O Coupling Devices
- O Trailer Electrical Connector
- C Other, Please Enter Comments Below

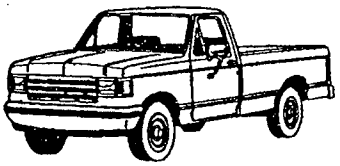
WAS UNIT SERVICED Y (N) DATE MILES

COMMENTS:

INSPECTORS SIGNATURE: [signature] DATE: 6-16-06

Shaw

Shaw Environmental and Infrastructure, Inc



Equipment Group

WEEKLY VEHICLE INSPECTION

UNIT NO: 100 664
UNIT MILES: 34677
INSPECTED BY: Ed Abney
EMP. NUMBER: 439515

WEEK ENDING: 6-17-06
CURRENT JOB NO:
FUEL FRONT: 1/2
FUEL REAR: N/A

For Authorized Repairs On Donlen Vehicles, Call 1-800-323-1483

RETAIN THESE FORMS ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL

N / A = NOT APPLICABLE C = COMMENTS O = OKAY N = NEEDS ATTENTION

- O Unit Washed, Interior Cleaned. Yes / No
- O Unit Fueled Yes / No
- O Air Conditioner / Heater
- O Battery / Starter / Horn
- O Lights, Head-Tail-Turn-Stop-Emer.
- O Ins. Card & Accident Report Kit
- O Current Registration, Plates
- O Service Brakes
- O Parking Brakes
- O Windshield Wipers / Washers
- O Mirrors-Inside-Outside
- O Engine Oil, Oil Pressure
- O Transmission Oil & Drive Line
- O Radiator / Cooling System
- O Exhaust / Muffler
- O Front Axle / Steering
- O Suspension System
- O Spare Tire
- C Jack & Lug Wrench
- O Tires / Wheels / Rims
- C Frame / Bumpers
- O Coupling Devices
- O Trailer Electrical Connector
- O Other, Please Enter Comments Below

WAS UNIT SERVICED Y / N	DATE	MILES

COMMENTS:
NO JACK IN TRUCK
REAR BUMPER PULLED ON DRIVER'S SIDE
BED RAILS HAVE DINGS

INSPECTORS SIGNATURE: Ed Abney DATE: 6-17-06

1006664 Incoming Insp

EQUIPMENT NUMBER

Chevy 2500 4x4

EQUIPMENT TYPE

34677

CURRENT ~~HOURS~~ Miles

6-17-06

CURRENT DATE

INDIAN HEAD

LOCATION / JOB

LOCATION FROM

Shaw™

Shaw Environmental & Infrastructure, Inc.

Equipment Division

EQUIPMENT RECEIPT INSPECTION

UPON RECEIPT OF THIS MACHINE, A COMPLETE AND THOROUGH INSPECTION MUST BE PERFORMED. IF ANY ITEMS ARE FOUND AND DETERMINED TO BE PROJECT DAMAGE OR MISUSE, REPAIRS MAY THEN BE ASSESSED TO THE APPROPRIATE PROJECT THE MACHINE WAS DAMAGED ON.

OPERATORS COMPARTMENT	SATISFACTORY YES	NO	COMMENTS
OPERATIONS / MAINTENANCE MANUAL	✓		
WINDOW GLASS, HEATER, A/C	✓		
GAUGES, INDICATORS, METERS	✓		
CONTROLS, LEVERS, PEDALS	✓		
DOORS, LATCHES, HINGES, ETC.	✓		
ENGINE COMPARTMENT			
ENGINE OIL	✓		
COOLANT	✓		
STEERING FLUID	✓		
TRANSMISSION / SWING CASE OIL	✓		
HYDRAULIC OIL	N/A		
BELTS, HOSES	✓		
BATTERIES, CABLES AND TERMINALS	✓		
ANY OBVIOUS LEAKS	✓		
EXTERIOR			
OVERALL APPEARANCE (PAINT, DAMAGE)	→		REAR Bumper/Bed SideRails
STEPS, HANDLES, LANDINGS	✓		
HYDRAULIC CYLINDERS, LINES, HOSES	N/A		
LINKAGES, SLACK OR WEAR	N/A		
GROUND ENGAGING TOOLS, TEETH, ETC.	N/A		
TIRES, WHEELS OR TRACKS	✓		
SAFETY			
LIGHTS, BRAKES, ETC.	✓		
HORN, BACKUP ALARM	✓		
SEAT BELT	✓		
FIRE EXTINGUISHER	✓		
WARNING SIGNS, ETC.	✓		

EQUIPMENT SERVICE

SERVICE DATE: HOURS: TYPE OF SERVICE:

ADDITIONAL COMMENTS:

NO JACK IN TRUCK
REAR Bumper Pulled on DRIVERS Side
Dings on Bed Side RAILS

INSPECTED BY: [signature] EMPLOYEE NUMBER: 439515

SUPERVISOR SIGNATURE: EMPLOYEE NUMBER:

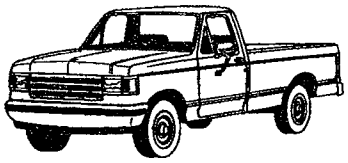
ALL MAINTENANCE CONCERNS SHOULD BE DIRECTED TO THE REGIONAL MAINTENANCE COORDINATOR

COPIES OF INSPECTIONS SHOULD BE FORWARDED IMMEDIATELY TO THE REGIONAL MAINTENANCE COORDINATOR

Shaw

Shaw Environmental and Infrastructure, Inc

Equipment Group



WEEKLY VEHICLE INSPECTION

UNIT NO: 100191
UNIT MILES: 43643
INSPECTED BY: Ed Abney
EMP. NUMBER: 439515

WEEK ENDING: 6-23-06
CURRENT JOB NO: 120359
FUEL FRONT: Full
FUEL REAR:

For Authorized Repairs On Donlen Vehicles, Call 1-800-323-1483

RETAIN THESE FORMS ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL

N / A = NOT APPLICABLE C = COMMENTS O = OKAY N = NEEDS ATTENTION

	Unit Washed, Interior Cleaned. Yes / No	O	Transmission Oil & Drive Line
	Unit Fueled Yes / No	O	Radiator / Cooling System
O	Air Conditioner / Heater	O	Exhaust / Muffler
O	Battery / Starter / Horn	O	Front Axle / Steering
O	Lights, Head-Tail-Turn-Stop-Emer.	O	Suspension System
O	Ins. Card & Accident Report Kit	O	Spare Tire
O	Current Registration, Plates	O	Jack & Lug Wrench
O	Service Brakes	O	Tires / Wheels / Rims
O	Parking Brakes	O	Frame / Bumpers
O	Windshield Wipers / Washers	O	Coupling Devices
O	Mirrors-Inside-Outside	O	Trailer Electrical Connector
O	Engine Oil, Oil Pressure	O	Other, Please Enter Comments Below

WAS UNIT SERVICED Y / N DATE MILES

COMMENTS:

INSPECTORS SIGNATURE: Ed Abney DATE: 6-23-06

EQUIP. NO. 38981

EQUIP. TYPE Cat 320 C

ENDING HRS. 1459

Shaw

Shaw Environmental and Infrastructure

WEEKLY EQUIPMENT INSPECTION

Note Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

WEEK ENDING 6.23.06

SUPERVISOR Cano Hernandez

LOCATION Indian Head

A=ADD O=OKAY C=COMMENTS

ITEM		SAT	SUN	MON	TUE	WED	THU	FRI
1	Check Engine Oil Level And Engine Compartment For Debris, Engine Oil Leaks, Etc.			O	O	O		O
2	Check Hydraulic Oil Level, Inspect The Cap And Vent.			O	O	O		O
3	Check Radiator Coolant Level, Check Radiator Fins For Dirt, Leaves, Debris Etc.			O	O	O		O
4	Check Transmission Oil Level (Dozers And Trucks) And Swing Case (Excavators)			O	O	O		O
5	Check Oil Level In Frame Joint Bearing, Consult Operators Manual. (Volvo A-40 Only)			NA	NA	NA		NA
6	Check For Leaks Of Any Kind, I.E., Oil Or Coolant.			O	O	O		O
7	Check Wheels, Tires, Tracks For Damage, Cuts, Pressures, Broken Links Etc.			C	C	C		C
8	Check Ground Engaging Tools, Look At Cutting Edge, Teeth, Blade, Bucket, Etc.			O	O	O		O
9	Inspect Visible Hydraulic Hoses And Lines, Check For Scuffs, Leaks, Etc.			O	O	O		O
10	Inspect Rops / Fops For Any Obvious Signs Of Loose Mounts, Broken Or Missing Bolts, Etc.			O	O	O		O
11	Check All Guages, Lights, Controls And Backup Alarms, Horn, Etc.			O	O	O		O
12	Inspect Operators Compartment For Cleanliness And Fire Extinguisher Charge. Check Floor For Build-Up Of Dirt Around Pedals, Or Any Loose Items. Inspect Seat And Seat Belts, Clean The Windows, Look For Cracks.			O	O	O		O
13	Do A Walk Around Inspection For Any Obvious Signs Of Future Problem Areas. Check Grab Handles And Step Treads, Etc.			O	O	O		O
14	Check Operation Of All Systems, Boom, Bucket, Blade, Dump Bed, Etc.			O	O	O		O
15	Look Under The Machine For Any Loose Or Hanging Objects, Leaks Or Anything Out Of The Ordinary.			O	O	O		O
16	Check Fuel Level, Fill Tank Prior To Beginning Operations.			O	O	O		O
17	Lube All Moving Parts Such As Blade, Bucket, Stick, Connecting Links, Equalizer Bar, Cylinder Pins And Any Point That Is Subject To The Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.			O	O	O		O
18	Check Breathing Air System (If Used) Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition.			NA				
19	Ensure The Presence Of The Operations / Maintenance Manual.			O	O	O		O

REPORT ALL DAMAGE TO SUPERVISOR IMMEDIATELY

COMMENTS: Please use line number and be specific. Notify your Regional Maintenance Coordinator of any items in need of immediate attention.

Line 7 - Link on track slightly Bent
Paint scuffed on Counterweight

Signature: [signature] Employee Number: 437266

THESE SHEETS ARE TO BE RETAINED ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL.

EQUIP. NO. Hotz 226 05 4271

EQUIP. TYPE JD Backhoe

ENDING HRS. 1104

Shaw

Shaw Environmental and Infrastructure

WEEKLY EQUIPMENT INSPECTION

WEEK ENDING 6-23-06

SUPERVISOR Cano Hernandez

LOCATION Indian Head

Note Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

A=ADD O=OKAY C=COMMENTS

ITEM		SAT	SUN	MON	TUE	WED	THU	FRI
1	Check Engine Oil Level And Engine Compartment For Debris, Engine Oil Leaks, Etc.			O	O	O		O
2	Check Hydraulic Oil Level, Inspect The Cap And Vent.			O	O	O		O
3	Check Radiator Coolant Level, Check Radiator Fins For Dirt, Leaves, Debris Etc.			O	O	O		O
4	Check Transmission Oil Level (Dozers And Trucks) And Swing Case (Excavators)			NA	NA	NA		NA
5	Check Oil Level In Frame Joint Bearing, Consult Operators Manual. (Volvo A-40 Only)			NA	NA	NA		NA
6	Check For Leaks Of Any Kind, I.E., Oil Or Coolant.			O	O	O		O
7	Check Wheels, Tires, Tracks For Damage, Cuts, Pressures, Broken Links Etc.			C	C	C		C
8	Check Ground Engaging Tools, Look At Cutting Edge, Teeth, Blade, Bucket, Etc.			O	O	O		O
9	Inspect Visible Hydraulic Hoses And Lines, Check For Scuffs, Leaks, Etc.			O	O	O		O
10	Inspect Rops / Fops For Any Obvious Signs Of Loose Mounts, Broken Or Missing Bolts, Etc.			O	O	O		O
11	Check All Guages, Lights, Controls And Backup Alarms, Horn, Etc.			C	C	C		C
12	Inspect Operators Compartment For Cleanliness And Fire Extinguisher Charge. Check Floor For Build-Up Of Dirt Around Pedals, Or Any Loose Items. Inspect Seat And Seat Belts, Clean The Windows, Look For Cracks.			C	C	C		C
13	Do A Walk Around Inspection For Any Obvious Signs Of Future Problem Areas. Check Grab Handles And Step Treads, Etc.			O	O	O		O
14	Check Operation Of All Systems, Boom, Bucket, Blade, Dump Bed, Etc.			O	O	O		O
15	Look Under The Machine For Any Loose Or Hanging Objects, Leaks Or Anything Out Of The Ordinary.			O	O	O		O
16	Check Fuel Level, Fill Tank Prior To Beginning Operations.			O	O	O		O
17	Lube All Moving Parts Such As Blade, Bucket, Stick, Connecting Links, Equalizer Bar, Cylinder Pins And Any Point That Is Subject To The Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.			O	O	O		O
18	Check Breathing Air System (If Used) Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition.			NA				
19	Ensure The Presence Of The Operations / Maintenance Manual.			O	O	O		O

REPORT ALL DAMAGE TO SUPERVISOR IMMEDIATELY

COMMENTS: Please use line number and be specific. Notify your Regional Maintenance Coordinator of any items in need of immediate attention.

Line 7 - Front Left tire slightly flat
Line 11 - Horn doesn't work
Line 12 - Lower right window cracked

Signature: [signature] Employee Number: 437766

THESE SHEETS ARE TO BE RETAINED ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL.

74745
EQUIPMENT NUMBER

Sunbelt Sweeper
EQUIPMENT TYPE

114
CURRENT HOURS

Shaw
Shaw Environmental & Infrastructure, Inc.
Equipment Division

7-5-06
CURRENT DATE

Site 57
LOCATION / JOB

LOCATION FROM

EQUIPMENT RECEIPT INSPECTION

UPON RECEIPT OF THIS MACHINE, A COMPLETE AND THOROUGH INSPECTION MUST BE PERFORMED. IF ANY ITEMS ARE FOUND AND DETERMINED TO BE PROJECT DAMAGE OR MISUSE, REPAIRS MAY THEN BE ASSESSED TO THE APPROPRIATE PROJECT THE MACHINE WAS DAMAGED ON.

	SATISFACTORY YES	SATISFACTORY NO	COMMENTS
OPERATORS COMPARTMENT			
OPERATIONS / MAINTENANCE MANUAL	X		
WINDOW GLASS, HEATER, A/C	NA		
GAUGES, INDICATORS, METERS	X		
CONTROLS, LEVERS, PEDALS	X		
DOORS, LATCHES, HINGES, ETC.	X		
ENGINE COMPARTMENT			
ENGINE OIL	X		
COOLANT	X		
STEERING FLUID	X		
TRANSMISSION / SWING CASE OIL	X		
HYDRAULIC OIL	X		
BELTS, HOSES	X		
BATTERIES, CABLES AND TERMINALS	X		
ANY OBVIOUS LEAKS	X		
EXTERIOR			
OVERALL APPEARANCE (PAINT, DAMAGE)	X		
STEPS, HANDLES, LANDINGS	X		
HYDRAULIC CYLINDERS, LINES, HOSES	X		
LINKAGES, SLACK OR WEAR	X		
GROUND ENGAGING TOOLS, TEETH, ETC.	X		
TIRES, WHEELS OR TRACKS	X		
SAFETY			
LIGHTS, BRAKES, ETC.	X		
HORN, BACKUP ALARM	X		
SEAT BELT	X		
FIRE EXTINGUISHER		X	
WARNING SIGNS, ETC.	X		

EQUIPMENT SERVICE

SERVICE DATE: HOURS: TYPE OF SERVICE:

ADDITIONAL COMMENTS:

INSPECTED BY: Tim Collins EMPLOYEE NUMBER: 437766

SUPERVISOR SIGNATURE: EMPLOYEE NUMBER:

ALL MAINTENANCE CONCERNS SHOULD BE DIRECTED TO THE REGIONAL MAINTENANCE COORDINATOR

COPIES OF INSPECTIONS SHOULD BE FORWARDED IMMEDIATELY TO THE REGIONAL MAINTENANCE COORDINATOR

EQUIP. NO. 22605 4271

EQUIP. TYPE JD Backhoe

ENDING HRS. 1114

Shaw

Shaw Environmental and Infrastructure

WEEK ENDING 7.7.06

SUPERVISOR Caro Hernandez

LOCATION Indian Head

WEEKLY EQUIPMENT INSPECTION

Note Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

A=ADD O=OKAY C=COMMENTS

ITEM		SAT	SUN	MON	TUE	WED	THU	FRI
1	Check Engine Oil Level And Engine Compartment For Debris, Engine Oil Leaks, Etc.					O	O	O
2	Check Hydraulic Oil Level, Inspect The Cap And Vent.					O	O	O
3	Check Radiator Coolant Level, Check Radiator Fins For Dirt, Leaves, Debris Etc.					O	O	O
4	Check Transmission Oil Level (Dozers And Trucks) And Swing Case (Excavators)					N/A	—	—
5	Check Oil Level In Frame Joint Bearing, Consult Operators Manual. (Volvo A-40 Only)					N/A	—	—
6	Check For Leaks Of Any Kind, I.E., Oil Or Coolant.					O	O	O
7	Check Wheels, Tires, Tracks For Damage, Cuts, Pressures, Broken Links Etc.					C	C	C
8	Check Ground Engaging Tools, Look At Cutting Edge, Teeth, Blade, Bucket, Etc.					O	O	O
9	Inspect Visible Hydraulic Hoses And Lines, Check For Scuffs, Leaks, Etc.					O	O	O
10	Inspect Rops / Fops For Any Obvious Signs Of Loose Mounts, Broken Or Missing Bolts, Etc.					O	O	O
11	Check All Guages, Lights, Controls And Backup Alarms, Horn, Etc.					C	C	C
12	Inspect Operators Compartment For Cleanliness And Fire Extinguisher Charge. Check Floor For Build-Up Of Dirt Around Pedals, Or Any Loose Items. Inspect Seat And Seat Belts, Clean The Windows, Look For Cracks.					C	C	C
13	Do A Walk Around Inspection For Any Obvious Signs Of Future Problem Areas. Check Grab Handles And Step Treads, Etc.					O	O	O
14	Check Operation Of All Systems, Boom, Bucket, Blade, Dump Bed, Etc.					O	O	O
15	Look Under The Machine For Any Loose Or Hanging Objects, Leaks Or Anything Out Of The Ordinary.					O	O	O
16	Check Fuel Level, Fill Tank Prior To Beginning Operations.					O	O	O
17	Lube All Moving Parts Such As Blade, Bucket, Stick, Connecting Links, Equalizer Bar, Cylinder Pins And Any Point That Is Subject To The Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.					O	O	O
18	Check Breathing Air System (If Used) Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition.					N/A	—	—
19	Ensure The Presence Of The Operations / Maintenance Manual.					O	O	O

REPORT ALL DAMAGE TO SUPERVISOR IMMEDIATELY

COMMENTS: Please use line number and be specific. Notify your Regional Maintenance Coordinator of any items in need of immediate attention.

Line 7 - Left front rim bent
Line 11 - Horn doesn't work
Line 12 - Front lower window Broken
~~Line 19~~

Signature: [signature] Employee Number: 437766

THESE SHEETS ARE TO BE RETAINED ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL.

EQUIP. NO. 68053

EQUIP. TYPE Bobcat

ENDING HRS. 812

Shaw

Shaw Environmental and Infrastructure

WEEKLY EQUIPMENT INSPECTION

Note Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

WEEK ENDING 7-7-06

SUPERVISOR Carlos Hernandez

LOCATION Indian Head

A=ADD O=OKAY C=COMMENTS

ITEM		SAT	SUN	MON	TUE	WED	THU	FRI
1	Check Engine Oil Level And Engine Compartment For Debris, Engine Oil Leaks, Etc.					O	O	O
2	Check Hydraulic Oil Level, Inspect The Cap And Vent.					O	O	O
3	Check Radiator Coolant Level, Check Radiator Fins For Dirt, Leaves, Debris Etc.					O	O	O
4	Check Transmission Oil Level (Dozers And Trucks) And Swing Case (Excavators)					O	O	O
5	Check Oil Level In Frame Joint Bearing, Consult Operators Manual. (Volvo A-40 Only)					NA	—	—
6	Check For Leaks Of Any Kind, I.E., Oil Or Coolant.					O	O	O
7	Check Wheels, Tires, Tracks For Damage, Cuts, Pressures, Broken Links Etc.					O	O	O
8	Check Ground Engaging Tools, Look At Cutting Edge, Teeth, Blade, Bucket, Etc.					O	O	O
9	Inspect Visible Hydraulic Hoses And Lines, Check For Scuffs, Leaks, Etc.					O	O	O
10	Inspect Rops / Fops For Any Obvious Signs Of Loose Mounts, Broken Or Missing Bolts, Etc.					O	O	O
11	Check All Guages, Lights, Controls And Backup Alarms, Horn, Etc.					O	O	O
12	Inspect Operators Compartment For Cleanliness And Fire Extinguisher Charge. Check Floor For Build-Up Of Dirt Around Pedals, Or Any Loose Items. Inspect Seat And Seat Belts, Clean The Windows, Look For Cracks.					O	O	O
13	Do A Walk Around Inspection For Any Obvious Signs Of Future Problem Areas. Check Grab Handles And Step Treads, Etc.					O	O	O
14	Check Operation Of All Systems, Boom, Bucket, Blade, Dump Bed, Etc.					O	O	O
15	Look Under The Machine For Any Loose Or Hanging Objects, Leaks Or Anything Out Of The Ordinary.					O	O	O
16	Check Fuel Level, Fill Tank Prior To Beginning Operations.					O	O	O
17	Lube All Moving Parts Such As Blade, Bucket, Stick, Connecting Links, Equalizer Bar, Cylinder Pins And Any Point That Is Subject To The Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.					O	O	O
18	Check Breathing Air System (If Used) Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition.					NA	—	—
19	Ensure The Presence Of The Operations / Maintenance Manual.					O	O	O

REPORT ALL DAMAGE TO SUPERVISOR IMMEDIATELY

COMMENTS: Please use line number and be specific. Notify your Regional Maintenance Coordinator of any items in need of immediate attention.

Signature: [illegible]

Employee Number: 427766

THESE SHEETS ARE TO BE RETAINED ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL.

EQUIP. NO. 38981

EQUIP. TYPE Cat 320 C

ENDING HRS. 1488

Shaw

Shaw Environmental and Infrastructure

WEEKLY EQUIPMENT INSPECTION

Note Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

WEEK ENDING 7-9-06

SUPERVISOR Cano Hernandez

LOCATION Indian Head

A=ADD O=OKAY C=COMMENTS

ITEM		SAT	SUN	MON	TUE	WED	THU	FRI
1	Check Engine Oil Level And Engine Compartment For Debris, Engine Oil Leaks, Etc.			O	O	O	O	O
2	Check Hydraulic Oil Level, Inspect The Cap And Vent.			O	O	O	O	O
3	Check Radiator Coolant Level, Check Radiator Fins For Dirt, Leaves, Debris Etc.			O	O	O	O	O
4	Check Transmission Oil Level (Dozers And Trucks) And Swing Case (Excavators)			O	O	O	O	O
5	Check Oil Level In Frame Joint Bearing, Consult Operators Manual. (Volvo A-40 Only)			N/A	—	—	—	—
6	Check For Leaks Of Any Kind, I.E., Oil Or Coolant.			O	O	O	O	O
7	Check Wheels, Tires, Tracks For Damage, Cuts, Pressures, Broken Links Etc.			C	C	C	C	C
8	Check Ground Engaging Tools, Look At Cutting Edge, Teeth, Blade, Bucket, Etc.			O	O	O	O	O
9	Inspect Visible Hydraulic Hoses And Lines, Check For Scuffs, Leaks, Etc.			O	O	O	O	O
10	Inspect Rops / Fops For Any Obvious Signs Of Loose Mounts, Broken Or Missing Bolts, Etc.			O	O	O	O	O
11	Check All Guages, Lights, Controls And Backup Alarms, Horn, Etc.			O	O	O	O	O
12	Inspect Operators Compartment For Cleanliness And Fire Extinguisher Charge. Check Floor For Build-Up Of Dirt Around Pedals, Or Any Loose Items. Inspect Seat And Seat Belts, Clean The Windows, Look For Cracks.			O	O	O	O	O
13	Do A Walk Around Inspection For Any Obvious Signs Of Future Problem Areas. Check Grab Handles And Step Treads, Etc.			O	O	O	O	O
14	Check Operation Of All Systems, Boom, Bucket, Blade, Dump Bed, Etc.			O	O	O	O	O
15	Look Under The Machine For Any Loose Or Hanging Objects, Leaks Or Anything Out Of The Ordinary.			O	O	O	O	O
16	Check Fuel Level, Fill Tank Prior To Beginning Operations.			O	O	O	O	O
17	Lube All Moving Parts Such As Blade, Bucket, Stick, Connecting Links, Equalizer Bar, Cylinder Pins And Any Point That Is Subject To The Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.			O	O	O	O	O
18	Check Breathing Air System (If Used) Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition.			N/A	—	—	—	—
19	Ensure The Presence Of The Operations / Maintenance Manual.			O	O	O	O	O

REPORT ALL DAMAGE TO SUPERVISOR IMMEDIATELY

COMMENTS: Please use line number and be specific. Notify your Regional Maintenance Coordinator of any items in need of immediate attention.

Line 7 - Track link Slightly Bent
Paint scuffed on Counterweight

Signature: [signature]

Employee Number: 435766

THESE SHEETS ARE TO BE RETAINED ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL.

EQUIP. NO. 74745

EQUIP. TYPE Sunbelt Sweeper

ENDING HRS. 118

Shaw

Shaw Environmental and Infrastructure

WEEKLY EQUIPMENT INSPECTION

Note Quantities And Kinds of Fluids Added In Space At Bottom Of Sheet

WEEK ENDING 7-7-06

SUPERVISOR Cano Hernandez

LOCATION Indian Head

ITEM	A=ADD O=OKAY C=COMMENTS	SAT	SUN	MON	TUE	WED	THU	FRI
1	Check Engine Oil Level And Engine Compartment For Debris, Engine Oil Leaks, Etc.					O	O	O
2	Check Hydraulic Oil Level, Inspect The Cap And Vent.					O	O	O
3	Check Radiator Coolant Level, Check Radiator Fins For Dirt, Leaves, Debris Etc.					O	O	O
4	Check Transmission Oil Level (Dozers And Trucks) And Swing Case (Excavators)					NA		
5	Check Oil Level In Frame Joint Bearing, Consult Operators Manual. (Volvo A-40 Only)					NA		
6	Check For Leaks Of Any Kind, I.E., Oil Or Coolant.					O	O	O
7	Check Wheels, Tires, Tracks For Damage, Cuts, Pressures, Broken Links Etc.					O	O	O
8	Check Ground Engaging Tools, Look At Cutting Edge, Teeth, Blade, Bucket, Etc.					O	O	O
9	Inspect Visible Hydraulic Hoses And Lines, Check For Scuffs, Leaks, Etc.					O	O	O
10	Inspect Rops / Fops For Any Obvious Signs Of Loose Mounts, Broken Or Missing Bolts, Etc.					O	O	O
11	Check All Guages, Lights, Controls And Backup Alarms, Horn, Etc.					O	O	O
12	Inspect Operators Compartment For Cleanliness And Fire Extinguisher Charge. Check Floor For Build-Up Of Dirt Around Pedals, Or Any Loose Items. Inspect Seat And Seat Belts, Clean The Windows, Look For Cracks.					O	O	O
13	Do A Walk Around Inspection For Any Obvious Signs Of Future Problem Areas. Check Grab Handles And Step Treads, Etc.					O	O	O
14	Check Operation Of All Systems, Boom, Bucket, Blade, Dump Bed, Etc.					O	O	O
15	Look Under The Machine For Any Loose Or Hanging Objects, Leaks Or Anything Out Of The Ordinary.					O	O	O
16	Check Fuel Level, Fill Tank Prior To Beginning Operations.					O	O	O
17	Lube All Moving Parts Such As Blade, Bucket, Stick, Connecting Links, Equalizer Bar, Cylinder Pins And Any Point That Is Subject To The Grease Being Pushed Or Worn Out Due To Daily Use. Consult Manual For Grease Points.					O	O	O
18	Check Breathing Air System (If Used) Make Sure Bottle Is Full And Mask / Hose Assembly Is Clean And In Good Working Condition.					NA		
19	Ensure The Presence Of The Operations / Maintenance Manual.					O	O	O

REPORT ALL DAMAGE TO SUPERVISOR IMMEDIATELY

COMMENTS: Please use line number and be specific. Notify your Regional Maintenance Coordinator of any items in need of immediate attention.

Signature: [signature]

Employee Number: 937766

THESE SHEETS ARE TO BE RETAINED ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL.

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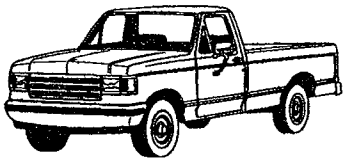
Shaw Environmental and Infrastructure, Inc



Equipment Group

WEEKLY VEHICLE INSPECTION

UNIT NO: 100191
UNIT MILES: 438664
INSPECTED BY: Ed Abney
EMP. NUMBER: 439515

WEEK ENDING: 7-7-06
CURRENT JOB NO:
FUEL FRONT: Full
FUEL REAR: N/A

For Authorized Repairs On Donlen Vehicles, Call 1-800-323-1483

RETAIN THESE FORMS ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL

N / A = NOT APPLICABLE **C** = COMMENTS **O** = OKAY **N** = NEEDS ATTENTION

O Unit Washed, Interior Cleaned. Yes / No
O Unit Fueled Yes / No
O Air Conditioner / Heater
O Battery / Starter / Horn
O Lights, Head-Tail-Turn-Stop-Emer.
O Ins. Card & Accident Report Kit
O Current Registration, Plates
O Service Brakes
O Parking Brakes
O Windshield Wipers / Washers
O Mirrors-Inside-Outside
O Engine Oil, Oil Pressure

O Transmission Oil & Drive Line
O Radiator / Cooling System
O Exhaust / Muffler
O Front Axle / Steering
O Suspension System
O Spare Tire
O Jack & Lug Wrench
O Tires / Wheels / Rims
O Frame / Bumpers
O Coupling Devices
O Trailer Electrical Connector
O Other, Please Enter Comments Below

WAS UNIT SERVICED Y / N	DATE	MILES

COMMENTS:

INSPECTORS SIGNATURE: Ed Abney DATE: 7-7-06

Shaw™
SHAW E & I, Inc.
Indian Head, Md

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : 120359 Site 57 Indian Head MD. **Date :** 7-11-06

BUSINESS LINE : Dept of The Navy **PROJECT NAME/NUMBER :** 120359
PROGRAM MANAGER : P. Kazmazinski - FSSI **PROJECT MANAGER :** Steve Carriere
GENERAL PROJECT DESCRIPTION : Site Restoration - TCE Contam. Removal Action
SITE ACTIVITIES AT TIME OF INSPECTION : Site Restoration

INTERVIEWED EMPLOYEE : Ed Abner
SAFETY ISSUE : NO ISSUES
CORRECTIVE ACTION :
ASSIGNED TO : **FOLLOW-UP DATE :**
CORRECTION VERIFIED BY: **DATE :**

INTERVIEWED EMPLOYEE : Steve Smith - FSSI Employee
SAFETY ISSUE : NO-ISSUES
CORRECTIVE ACTION :
ASSIGNED TO : **FOLLOW-UP DATE :**
CORRECTION VERIFIED BY: **DATE :**

INSPECTION COMPLETED BY : Dan Kernard **DATE :** 7-11-06

HEALTH AND SAFETY REVIEW BY : **DATE :**

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME: Indianhead Site 57 **DATE:** 7-11-06

		YES	NO	N/A
FIRST AID				
1	Are first aid kit locations identified & accessible?	✓		
2	Are emergency eye wash/safety showers available & inspected monthly?	✓		
3	Are first aid kits inspected weekly?	✓		
4	Is a qualified first aid/CPR provider on site?	✓		
PERSONAL PROTECTION EQUIPMENT				
1	Have levels of personnel protection been established?	✓		
2	Are respirators decontaminated, inspected & stored according to standard procedures?			✓
3	Have employees been fit-tested?			✓
4	Is defective personal protection equipment tagged & taken out of service?			✓
5	Does compressed breathing air meet CGA "D" minimum?			✓
6	Are there sufficient sizes & quantities of protective equipment?			✓
7	At a minimum, are employees utilizing safety glasses, hard hats & steel toe boots?	✓		
FIRE PREVENTION				
1	Are employees smoking only in designated outdoor areas?	✓		
2	Are fire lanes established and maintained?			✓
3	Are flammable liquid dispensing systems bonded?	✓		
4	Are approved safety cans available for storage of flammable liquids?	✓		
5	Has the local fire department been contacted?	✓		
6	Are fire extinguishers available & inspected monthly?	✓		
7	Are flammables and combustibles properly stored?	✓		
8	Are flammable storage cabinets available & used when needed?			✓
AIR MONITORING				
1	Is required air monitoring being conducted?	✓		
2	Are air monitoring instruments calibrated daily?	✓		
3	Are air monitoring logs up to date?	✓		
4	Are instrument user manuals available?	✓		
5	Are instruments being maintained?	✓		
6	Are employees notified of personal sampling results within 5 days of receipt?	✓		
WELDING AND CUTTING				
1	Are fire extinguishers present at welding & cutting operations?	✓		
2	Are confined spaces evaluated prior to and during cutting & welding operations?			✓
3	Have Hot Work Permits been completed?			✓
4	Are proper helmets, goggles, aprons & gloves available for welding and cutting operations?			✓
5	Are welding machines properly grounded?			✓
6	Are oxygen and fuel gas cylinders stored a minimum of 20 feet apart?			✓
7	Are only trained personnel permitted to operate welding & cutting equipment?			✓
8	Are gas cylinders transported in a secured vertical position with caps in place?			✓

No monitoring

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : Indian Head Site 57 **DATE :** 7-11-06

		YES	NO	N/A
HAND AND POWER TOOLS				
1	Are defective hand & power tools tagged and taken out of service?	✓		
2	Is eye protection available and used when operating power tools?	✓		
3	Are guards and safety devices in place on power tools?	✓		
4	Are power tools inspected before each use?	✓		
5	Are non-sparking tools available when necessary?			✓
6	Is the correct tool being used for the job?	✓		
MOTOR VEHICLES				
1	Are vehicles regularly inspected?	✓		
2	Are personnel licensed for the vehicles they operate?	✓		
3	Are unsafe vehicles tagged and reported to the supervisor?	✓		
4	Is vehicle's safety equipment operating properly?	✓		
5	Are loads secure?	✓		
6	Are vehicle occupants using seat belts?	✓		
7	Are current insurance cards and blank accident report forms located in vehicles?	✓		
EMERGENCY PLANS				
1	Are emergency telephone numbers posted?	✓		
2	Have emergency escape routes been designated?	✓		
3	Are employees familiar with the emergency signal?	✓		
4	Has the emergency route to the hospital been established & posted?	✓		
5	Is a vehicle on site that can transport injured employees to the hospital?	✓		
MATERIALS HANDLING				
1	Are the materials stacked and stored to prevent sliding and collapsing?			
2	Are tripping hazards identified?			
3	Are semi-trailers chocked?			
4	Are fixed jacks used under semi-trailers?			
5	Are riders prohibited on materials handling equipment?			
6	Are approved manlifts provided for the lifting of personnel?			
7	Are personnel in manlifts wearing approved fall protection devices?			
FIRE PROTECTION				
1	Has a fire alarm system been established?	✓		
2	Do employees know the location and use of all fire extinguishers?	✓		
3	Are the fire extinguisher locations posted?	✓		
4	Are combustible materials segregated from open flames?	✓		
5	Have fire extinguishers been professionally inspected during the last year?	✓		
6	Are fire extinguishers visually inspected monthly?	✓		
ELECTRICAL				
1	Is electrical equipment and wiring properly guarded and maintained in good conditions?	✓		
2	Are extension cords kept out of wet areas?	✓		
3	Is damaged electrical equipment tagged and taken out of service?	✓		
4	Have underground electrical lines been identified by proper authorities?			✓
5	Has a lockout/tagout system been established?	✓		
6	Are GFC's being used on all temporary electrical systems and as needed?	✓		

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : Tilian Heard Site 57 **DATE :** 7-1-08

		YES	NO	N/A
ELECTRICAL (continued)				
7	Are extension cords being inspected daily (I.e., group in place, no unapproved splices)	✓		
8	Are warning signs exhibited on high voltage equipment (250v or greater) ?			✓
9	Is adequate distance maintained from overhead electrical lines?	✓		
10	Are switches, circuit breakers & switchboards installed in wet locations enclosed in weatherproof enclosures?	✓		
CRANES AND RIGGING				
1	Are cranes inspected daily prior to use?			
2	Are cranes swing areas barricaded or marked?			
3	Is all rigging equipment tagged with an identification number & rated capacity?			
4	Is rigging equipment inspection documented?			
5	Are slings, chains and rigging inspected before each use?			
6	Are damaged slings, chains and rigging tagged & taken out of service?			
7	Are slings padded or protected from sharp corners?			
8	Do employees keep clear of suspended loads?			
9	Are rated load capacities and special hazard warnings posted on crane?			
10	Are the records of annual crane inspection available?			
11	Has accessible areas within the swing radius of the rear of the crane been barricaded?			
12	Do crane operators have required training/certifications?			
COMPRESSED GAS CYLINDERS				
1	Are breathing air cylinders charged only to prescribed pressures?			
2	Are like cylinders segregated and stored in well ventilated areas?			
3	Is smoking prohibited in cylinder storage areas?			
4	Are cylinders stored secured and upright?			
5	Are cylinder protected from snow, rain, etc. ?			
6	Are cylinder caps in place before cylinders are moved?			
7	Are fuel gas and oxygen cylinders stored a minimum of 20 feet apart?			
8	Are propane cylinders stored and used only outside of buildings?			
SCAFFOLDING				
1	Is scaffolding placed on a flat, firm surface?			
2	Are scaffold plants free of mud, ice, grease, etc. ?			
3	Is scaffolding inspected before each use?			
4	Are defective scaffold parts taken out of service?			
5	Have employees completed scaffold user training?			
6	On scaffolds where platforms are overlapped, is planking a minimum of 12 inches?			
7	Does scaffold planking extend over end supports between 6 to 18 inches			
8	Are employees restricted from working on scaffolds during storms & high winds?			
9	Are all pins in place and wheels chocked?			
10	Is required perimeter guarding (top & mid rails, toe board) present?			
11	Has a competent person been designated to oversee scaffold construction?			
12	Are employees prohibited from moving mobile scaffold horizontally while employees are on them?			
13	Are all scaffold components manufactured by the same company?			

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : Indian Head Site 57 **DATE :** 7-11-06

		YES	NO	N/A
WALKING AND WORKING SURFACES				
1	Are ladders regularly inspected?			
2	Are accessways, stairways, ramps and ladders clean of ice, mud, snow & debris?			
3	Are ladders being used in a safe manner?			
4	Are ladders kept out of passageways, doors or driveways?			
5	Are broken or damaged ladders tagged & taken out of service?			
6	Are metal ladders prohibited in electrical service?			
7	Are stairways and floor openings covered?			
8	Are safety feet installed on straight and extension ladders?			
9	Is general housekeeping being maintained?			
10	Are ladders tied off?			
11	Are handrails and siderails installed along the unprotected sides of stairways having 4 or more risers or rising more than 30 inches?			
SITE SAFETY PLAN				
1	Is a site safety plan available on site or accessible to all employees?	✓		
2	Does the safety plan accurately reflect site conditions and tasks?	✓		
3	Have potential hazards been described to employees on site?	✓		
4	Is there a designated safety official on site?	✓		
5	Have all employees signed the safety plan acknowledgment form?	✓		
SITE POSTERS				
1	Are the following posters displayed in a prominent and accessible area?			
	A Minimum Wage	✓		
	B OSHA Job Protection	✓		
	C Equal Employment Opportunity	✓		
2	Are all required state-specific posters displayed?	✓		
SITE CONTROL				
1	Are work zones clearly marked?	✓		
2	Are support trailers located to minimize exposure from a potential release?	✓		
3	Are support trailers accessible for approach by emergency vehicles?	✓		
4	Is the site properly secured during and after work hours?	✓		
5	Is an exclusion zone sign-in/sign-out log maintained?	✓		✓
6	Are only employees with current training & physicals permitted in exclusion zone?	✓		
HEAVY EQUIPMENT				
1	Is heavy equipment inspected as prescribed by the manufacturer?	✓		
2	Is defective heavy equipment tagged and taken out of service?	✓		
3	Are project roads & structures inspected for load capacities & proper clearances?	✓		
4	Is heavy equipment shut down for fueling and maintenance?	✓		
5	Are backup alarms installed and working on mobile equipment?	✓		
6	Have qualified equipment operators been designated?	✓		
7	Are riders prohibited on heavy equipment?	✓		
8	Are guards and safety appliances in place and used?	✓		
9	Are operators using the "THREE POINT" system when mounting/dismounting equipment?	✓		

PROJECT SAFETY INSPECTION REPORT

PROJECT NAME : Turkey Head Site 54 **DATE :** 7-11-06

		YES	NO	N/A
EXCAVATION				
1	Has a "competent person" been designated to oversee excavation activities?			
2	Prior to opening excavations, are utilities located and marked?			
3	Has a professional engineer evaluated all excavations greater than 20 feet deep?			
4	Is there rescue equipment on site & accessible to the excavation area?			
5	Is excavated material placed a minimum of 24 inches from the excavation?			
6	Are the sides of the excavation sloped or shored to prevent cave in?			
7	Have excavations greater than 4 feet deep been monitored for hazardous atmospheres(I.e. LEL/O2 deficiency)?			
8	Are ladders or ramps used in excavations over 4 feet deep?			
9	Are means of egress available so as to require no more than 25 feet of lateral travel?			
10	Are barriers, I.e., guardrails or fences, placed around excavations near pedestrian or vehicle thoroughfares?			
11	Is excavation inspected daily by competent persons and documented?			
CONFINED SPACED				
1	Have employees been trained in the hazards of confined space?			
2	Are confined space permits posted at the entrance to confined spaces?			
3	Is a copy of the confined space entry procedure available?			
4	Has a rescue plan been established?			
5	Is an entry supervisor present at each permit-required entry?			
6	Are required extraction/fall protection devices being used?			
DECONTAMINATION				
1	Are decontamination stations set up on site?	✓		
2	Is decontamination water properly contained and disposed of?	✓		
3	Are all pieces of equipment inspected for proper decontamination before leaving the site?	✓		
4	Are shin/metatarsal guards being used during power washing activities?	✓		
HAZARD COMMUNICATION				
1	Is there a copy of the HAZCOM procedure on site?	✓		
2	Are there MSDS's for required materials/chemicals present on site?	✓		
3	Are all containers properly labeled, as to content; hazard?	✓		
4	Have employees been trained in accordance with the HAZCOM procedure?	✓		
5	Do employees (including subcontractors) know and understand the effects of exposure from the chemicals on site?	✓		
6	Have all personnel signed the HAZCOM acknowledgment form?	✓		
7	Is there an update list of chemicals maintained on site?	✓		
TRAINING				
1	Are tailgate safety meetings being conducted daily?	✓		
2	Are current training/medical records maintained on site?	✓		
DOCUMENTATION				
1	Is an OSHA 200 Log maintained on site & posted during the month of February?	✓		
2	Are accident report forms available?	✓		
3	Is a copy of health & safety policy and procedures available on site?	✓		

PROJECT SAFETY INSPECTION REPORT

PROJECT : 120359 Site 57 **Date :** _____

ALL NEGATIVE RESPONSES	CORRECTIVE ACTION	ASSIGNED TO	DATE ASSIGNED	DATE COMPLETED	VERIFIED BY
	No Issues				

DESCRIBE POSITIVE SAFETY OBSERVATIONS

Site is well Protected by High Vese Orange Fence
Road Barricades are in place
The work Site is Clean & Free of Tripping Hazards
Proper PPE is being worn

Carl Ford
7-11-06

Shaw

Shaw Environmental and Infrastructure, Inc — Equipment Group

WEEKLY VEHICLE INSPECTION

UNIT NO: 100191
UNIT MILES: 44291
INSPECTED BY: EJ Abney
EMP. NUMBER: 439515

WEEK ENDING: 7-14-06
CURRENT JOB NO:
FUEL FRONT: 3/8
FUEL REAR:

For Authorized Repairs On Donlen Vehicles, Call 1-800-323-1483

RETAIN THESE FORMS ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL

N / A = NOT APPLICABLE C = COMMENTS O = OKAY N = NEEDS ATTENTION

- O Unit Washed, Interior Cleaned. Yes / No
- O Unit Fueled Yes / No
- O Air Conditioner / Heater
- O Battery / Starter / Horn
- O Lights, Head-Tail-Turn-Stop-Emer.
- O Ins. Card & Accident Report Kit
- O Current Registration, Plates
- O Service Brakes
- O Parking Brakes
- O Windshield Wipers / Washers
- O Mirrors-Inside-Outside
- O Engine Oil, Oil Pressure
- O Transmission Oil & Drive Line
- O Radiator / Cooling System
- O Exhaust / Muffler
- O Front Axle / Steering
- O Suspension System
- O Spare Tire
- O Jack & Lug Wrench
- O Tires / Wheels / Rims
- O Frame / Bumpers
- O Coupling Devices
- O Trailer Electrical Connector
- O Other, Please Enter Comments Below

WAS UNIT SERVICED Y / N	DATE	MILES

COMMENTS:

INSPECTORS SIGNATURE: EJ Abney DATE: 7-14-06

38981
EQUIPMENT NUMBER

Cat 320 C
EQUIPMENT TYPE

1500
CURRENT HOURS

Shaw
Equipment Division

7·18·06
CURRENT DATE

120359
PROJECT NUMBER

YES / NO
HAZARDOUS SITE

CERTIFICATION OF DECONTAMINATION

Equipment Must Be Properly And Throroughly Deconned Before Release From The Project, Including Undercarriage, Internal Compartments, Belly Pans, Final Drives And Cab Interior, Etc. Failure To Decon Properly May Result In The Refusal To Demobe The Equipment.

SPECIFIC AREAS CLEANED

AXLES X
FRAME X
BODY / CAB X
BUCKET / BLADE
BELLY PANS X
TIRES, WHEELS OR TRACKS X

OTHER AREAS CLEANED

CONTAMINATES CONTACTED ON SITE: Arsenic, TCE
DECONTAMINATION SOLUTION(S) USED: Water
DECONTAMINATION PROCESS (DESCRIBE): High pressure wash
SAMPLING LOCATIONS, (IF REQUIRED)
ANALYTICAL RESULTS (IF REQUIRED)

SAMPLE #	DATE SAMPLED	RESULTS	ACTION LEVEL

OK TO DEMOBE OFF SITE ? YES NO

ADDITIONAL COMMENTS:

DECONNED BY: Tim Collins
EMPLOYEE NUMBER: 437766
SUPERVISOR SIGNATURE:
EMPLOYEE NUMBER:

One Copy Of Certification Should Accompany The Equipment To Destination, One Copy For Files.
One Copy Of Certification Should Be Faxed Immediately To The Regional Maintenance Coordinator.

38981
Equipment Unit Number

Cat 320 C
Equipment Type

1500
Current Meter Reading

Shaw®
Equipment Services Group

7-18-06
Current Date

Project Mobed To
Indian Head Site 57
Project Mobed From

Equipment Mobe/Demobe Inspection Form

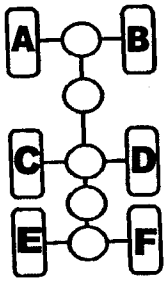
A complete and thorough inspection must be done when equipment is removed from projects. Equipment being de-mobed from the site must be thoroughly and completely deconned inside and out prior to de-mobe. Failure to do so may result in refusal to de-mobe the equipment. One copy of this must accompany the dispatch form, and one faxed to Pete Bankston @636.326.7135

	SATISFACTORY YES	NO	COMMENTS
OPERATORS COMPARTMENT			
Seat, Seat Belts, Operation/Maintenance Manual	X		
Cleanliness, Window Glass, Wipers/Washers	X		
Gauges, Indicators, Meters, Compressed Air System (Trucks)	X		
Heater/Air Conditioner, Defroster, Controls, Levers, Pedals	X		
Systems Check, Cycle Times, Brake Functions, Etc.	X		
Doors, Latches, Hinges, Radio, Antenna, Microphone	X		
ENGINE COMPARTMENT			
Engine Oil, Compartment Doors, Hood, Hood Latch & Grill	X		
Coolant, Radiator Fins, Cap, Fan Speed (Trucks)	X		
Swing Case, Steering Fluid, Brake Oil (Trucks)	X		
Transmission Oil, Differentials, Vent Filters (Trucks)	X		
Hydraulic Oil, Tank, Sight Glass & Cover	X		
Belts, Hoses, Exhaust System, Belly Pans	X		
Batteries, Compartment, Cables And Terminals	X		
Obvious Leaks? **If Yes, Indicate Where & What Kind**		X	
EXTERIOR			
Overall Appearance, Unit Numbers, Logos, Paint, Damage?	X		Paint scuffed on counterweight
Steps, Handles, Landings, Mirrors, Cab Mounts (Trucks)	X		
Hydraulic Cylinders, Lines, Hoses, Differentials (Trucks)	X		
Accumulators, Hitch Point (Trucks) Linkages, Slack or Wear?	X		
Ground Engaging Tools, Teeth, Cutting Edge, Etc.	X		
Attachments, Knives, Piercing Point, Jaws, (Shears or Grapple)	X		
Tires, Bogies, Wheels, Tracks **Enter Pressures Below**	X		Track link bent slightly
SAFETY			
Lights, Stop, Tail, Turn, Brakes, Etc.	X		
Horn, Backup Alarm, Warning Devices	X		
Seat Belts, Belt Anchors, Spot Mirrors	X		
Fire Extinguisher (Mounted, Current Certification And Charge)?	X		
Warning Signs & Labels or Other Safety Issues	X		

EQUIPMENT SERVICE

Last Service Date:	Hours:	Type Of Service:

ADDITIONAL COMMENTS:



Inspected By, Name & Date: Tim Collins 7-18-06 Employee Number: 437766

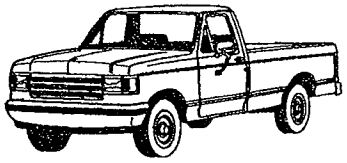
Supervisor Signature: Employee Number:

Please Enter Tire Readings Here	Tire "A"	Pressure:		Tire "C"	Pressure:		Tire "E"	Pressure:	
		Depth:			Depth:			Depth:	
	Tire "B"	Pressure:		Tire "D" 39	Pressure:		Tire "F"	Pressure:	
		Depth:			Depth:			Depth:	

A Copy Of this Inspection Should Be Faxed To Pete Bankston At 636.326.7135

All Maintenance Concerns Should Be Directed To The Regional Maintenance Coordinator

Shaw



Shaw Environmental and Infrastructure, Inc — Equipment Group

WEEKLY VEHICLE INSPECTION

UNIT NO: 386-510230
UNIT MILES: 40022
INSPECTED BY: Ed Abney
EMP. NUMBER: 439515

WEEK ENDING: 7-21-06
CURRENT JOB NO: 120359
FUEL FRONT: 3/4
FUEL REAR: N/A

For Authorized Repairs On Donlen Vehicles, Call 1-800-323-1483

RETAIN THESE FORMS ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL

N / A = NOT APPLICABLE C = COMMENTS O = OKAY N = NEEDS ATTENTION

O Unit Washed, Interior Cleaned. Yes / No
O Unit Fueled Yes / No
O Air Conditioner / Heater
O Battery / Starter / Horn
O Lights, Head-Tail-Turn-Stop-Emer.
O Ins. Card & Accident Report Kit
O Current Registration, Plates
O Service Brakes
O Parking Brakes
O Windshield Wipers / Washers
O Mirrors-Inside-Outside
O Engine Oil, Oil Pressure

Transmission Oil & Drive Line
O Radiator / Cooling System
O Exhaust / Muffler
O Front Axle / Steering
O Suspension System
O Spare Tire
O Jack & Lug Wrench
O Tires / Wheels / Rims
O Frame / Bumpers
O Coupling Devices
O Trailer Electrical Connector
C Other, Please Enter Comments Below

WAS UNIT SERVICED Y / N	DATE	MILES

COMMENTS:
* Tailgate missing cap

INSPECTORS SIGNATURE: [signature] DATE: 7-21-06

Shaw

Shaw Environmental and Infrastructure, Inc

Equipment Group

WEEKLY VEHICLE INSPECTION

UNIT NO:	100191	WEEK ENDING:	7-21-07
UNIT MILES:	44626	CURRENT JOB NO:	120359
INSPECTED BY:	Ed Abney	FUEL FRONT:	1/2
EMP. NUMBER:	439515	FUEL REAR:	NA

For Authorized Repairs On Donlen Vehicles, Call 1-800-323-1483

RETAIN THESE FORMS ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL

N / A = NOT APPLICABLE **C** = COMMENTS **O** = OKAY **N** = NEEDS ATTENTION

O	Unit Washed, Interior Cleaned. Yes / (No)	O	Transmission Oil & Drive Line
O	Unit Fueled (Yes) / No	O	Radiator / Cooling System
O	Air Conditioner / Heater	O	Exhaust / Muffler
O	Battery / Starter / Horn	O	Front Axle / Steering
O	Lights, Head-Tail-Turn-Stop-Emer.	O	Suspension System
O	Ins. Card & Accident Report Kit	O	Spare Tire
O	Current Registration, Plates	O	Jack & Lug Wrench
O	Service Brakes	O	Tires / Wheels / Rims
O	Parking Brakes	O	Frame / Bumpers
O	Windshield Wipers / Washers	O	Coupling Devices
O	Mirrors-Inside-Outside	O	Trailer Electrical Connector
O	Engine Oil, Oil Pressure	O	Other, Please Enter Comments Below

WAS UNIT SERVICED Y / N	DATE	MILES

COMMENTS:

INSPECTORS SIGNATURE: Ed Abney DATE: 7-21-06

Shaw

Shaw Environmental and Infrastructure, Inc

Equipment Group

WEEKLY VEHICLE INSPECTION

UNIT NO: 100664
UNIT MILES: 35768
INSPECTED BY: Ed Abney
EMP. NUMBER: 439515

WEEK ENDING: 7-21-06
CURRENT JOB NO: 120359
FUEL FRONT: 1/2
FUEL REAR: NA

For Authorized Repairs On Donlen Vehicles, Call 1-800-323-1483

RETAIN THESE FORMS ON PROJECT FOR REVIEW BY EQUIPMENT GROUP PERSONNEL

N / A = NOT APPLICABLE C = COMMENTS O = OKAY N = NEEDS ATTENTION

O Unit Washed, Interior Cleaned. Yes / No
O Unit Fueled Yes / No
O Air Conditioner / Heater
O Battery / Starter / Horn
O Lights, Head-Tail-Turn-Stop-Emer.
O Ins. Card & Accident Report Kit
O Current Registration, Plates
O Service Brakes
O Parking Brakes
O Windshield Wipers / Washers
O Mirrors-Inside-Outside
O Engine Oil, Oil Pressure

Transmission Oil & Drive Line
O Radiator / Cooling System
O Exhaust / Muffler
O Front Axle / Steering
O Suspension System
O Spare Tire
O Jack & Lug Wrench
O Tires / Wheels / Rims
C Frame / Bumpers
O Coupling Devices
O Trailer Electrical Connector
O Other, Please Enter Comments Below

WAS UNIT SERVICED Y / N	DATE	MILES

COMMENTS:
X Rear Bumper (L) Side Bent & dented

INSPECTORS SIGNATURE: Ed A Abney DATE: 7-21-06

SECTION 2.0
JOB SAFETY ANALYSES
(JSA's)

Job Safety Analysis

Date: 5/31/06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins
		Are other crews in area? **YES**
Pre-Job Preparation: 1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Wind Direction:	
	Evacuation Route: **AS POSTED**	New: X
	Assembly Point: **AS POSTED**	Revised:

Job Task (What are you doing?)	Audit the Job:
Site setup	Audit Time:
Fill sandbags	
move equipment	
Potential Hazards	
Lifting	Supervisor's Comments
Heavy equipment ops	
Recommended Corrective Action or Procedure	
Use proper lifting technique	
Communicate w/ operator	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Carno [illegible]	
[illegible]	Adam Fibrosky	
Steve Smith	[illegible]	
[illegible]		
J WRIGHT H & S		

SUPERVISOR/FOREMAN: _____

Job Safety Analysis

Date: 6-1-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE:
LEVEL D

Safety Access/Location

Safe Haven: **TRAILER**

Wind Direction:

Evacuation Route:
AS POSTED

Assembly Point: **AS POSTED**

Supervisor or Work: **B. Harris**

JSA Prepared By: Tim Collins

Are other crews in area? **YES**

New	X	
Revised		

Pre-Job Preparation:

1. Fill Out JSA
2. Review JSA (crew)
3. Sign JSA (crew)

Job Task (What are you doing?)	Audit the Job:
Continue site setup	Audit Time:
Install E & S Controls	
High vis fence	
Move Sand from site 17 to 57	

Potential Hazards	Supervisor's Comments
lifting	Three-Point Contact on & off Equipment
Trenching - silt fence - Driving Stakes	
Traffic	

Recommended Corrective Action or Procedure	Supervisor's Initials:
Use Proper lifting technique	CK.
Stay Clear of trencher when in use	
Yeild to all traffic when driving off road equipment	

Crew Names/Signatures		
[signature]	Cano Hernandez	
Adam Forshey [signature]	ADAM FORSHEY	
Ed Abney [signature]	Jim Wright H & S	
Steve Smith [signature]		

SUPERVISOR/FOREMAN: _____

Job Safety Analysis

Date: 6/2/06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE:
LEVEL D

Safety Access/Location

Safe Haven: **TRAILER**

Wind Direction:

Evacuation Route:
AS POSTED

Assembly Point: **AS POSTED**

Supervisor or Work: **B. Harris**

JSA Prepared By: H. STICKLE

Are other crews in area? **YES**

New	X	
Revised		

Pre-Job Preparation:

1. Fill Out JSA
2. Review JSA (crew)
3. Sign JSA (crew)

Job Task (What are you doing?)	Audit the Job:
1) EXCAVATING SOIL	Audit Time:
2) STOCKPILE SOIL	
3) COVER SOIL STOCKPILE	
4) HIGH VIS FENCE	

Potential Hazards	Supervisor's Comments
1) STRUCK BY AGAINST	HS 308
2) ROAD TRAFFIC	
3) STRAINS + SPRAINS	
4) PUNCTURES	

Recommended Corrective Action or Procedure	Supervisor's Initials:
1) STAY OUT OF SWING RADIUS	
2) USE SPOTTER	
3) USE MACHINES WHEN POSSIBLE GET HELP	
4) WEAR LEATHER GLOVES	

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]	JIM WRIGHT H&S	
Anthony Crowley		
[illegible]		

SUPERVISOR/FOREMAN [illegible]

Job Safety Analysis

Date: 6-5-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Abney
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X Revised:
	Assembly Point: **AS POSTED**	

Job Task (What are you doing?)	Audit the Job:
E&S Site 42	Audit Time:
E&S Site 57	

Potential Hazards

Slip Trip Fall
Pinch Points
Heat Stress/Stroke
Heavy Lifting

Supervisor's Comments

Recommended Corrective Action or Procedure

Proper PPE
Eye contact w/operators
Hydrate - watch the other guys
Proper Lifting techniques

Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	Cam Hernady
[illegible]	[illegible]	
[illegible]	[illegible]	
[illegible]		

SUPERVISOR/FOREMAN: _____

Job Safety Analysis

Date: 6-6-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Stanley
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X
	Assembly Point: **AS POSTED**	Revised:

Job Task (What are you doing?)	**Audit the Job:**
INSTALL DECON PAD SITE 57	Audit Time:
INSTALL MATERIAL HANDLING PAD	
FINISH E&S	
Potential Hazards	
HEAVY LIFTING	Supervisor's Comments
SLIP TRIP & FALL	
HEAT STRESS	
CLOSE QUARTERS HEAVY EQUIP OPS	
Recommended Corrective Action or Procedure	
PROPER LIFTING TECHNIQUES	
PROPER PPE	
HYDRATE — WATCH OUT FOR THE OTHER GUY	Supervisor's Initials:
EYE CONTACT W/OPERATORS	

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]		
[illegible]		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 6-7-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X
	Assembly Point: **AS POSTED**	Revised:

Job Task (What are you doing?)	Audit the Job:
Install Material handling Pad	Audit Time:
Fill sand bags	
Begin excavation when E&S Controls complete	
Potential Hazards	
Heavy Equipment operation - confined area	Supervisor's Comments
Heavy lifting	
Overhead utilities	
excavation	
Traffic	
Recommended Corrective Action or Procedure	
Utilize spotter	
Use Proper lifting technique	
Probe - dig around known utilities (HS-308)	Supervisor's Initials:
Traffic Controls	

Crew Names/Signatures		
Tim Collins	Dave Harris	
Jim Wright	Steve Smith	
[illegible]	[illegible]	

SUPERVISOR/FOREMAN: [signature]

Job Safety Analysis

Date: 6/8/06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X Revised:
	Assembly Point: **AS POSTED**	

Job Task (What are you doing?)	Audit the Job:
Excavation - Area B	Audit Time:
Cover material handling Pad - secure w sandbags	
Potential Hazards	
Heavy Equipment operation	Supervisor's Comments
Overhead & underground utilities	
Heavy lifting	
trip Fall hazards	
Recommended Corrective Action or Procedure	
Utilize spotter for all equipment ops	
wear reflective vests	
use Proper lifting technique	Supervisor's Initials:

Crew Names/Signatures		
[illegible]		
Steve Smith		
Ed Abney		
Jim WRIGHT		
Adam Forsyth		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 6-12-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Abney
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X
	Assembly Point: **AS POSTED**	Revised:

Job Task (What are you doing?)	**Audit the Job:**
Removing Wells	Audit Time:
Checking EXCAVATIONS	
Checking E&S controls	
INSTALL TRAFFIC CONTROLS AREA "C"	
Potential Hazards	
Slip Trip FALL	
Pinch Points	Supervisor's Comments
Muddy Conditions	
Recommended Corrective Action or Procedure	
Watch your work AREAS	
Eye Contact w/operators	
Proper PPE	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	[illegible]	
Steve Smith	Adam Forsley	
[illegible]		
Jim WRIGHT		

SUPERVISOR/FOREMAN: _____

Job Safety Analysis

Date: 6/13/06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Jim Collins
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X Revised:
	Assembly Point: **AS POSTED**	

Job Task (What are you doing?)	Audit the Job:
Excavate Area C	Audit Time:
Potential Hazards	
Heavy Equipment in Confined area Traffic Slip trip Fall hazards	Supervisor's Comments
Recommended Corrective Action or Procedure	
Communicate w/ operators - Stay clear of swing radius Utilize spotter on roads watch step near excavation	Supervisor's Initials:

Crew Names/Signatures		
[illegible]		
[illegible]		
Jim Wright		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 6/14/06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: H. STICKLE
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X Revised:
	Assembly Point: **AS POSTED**	

Job Task (What are you doing?)	Audit the Job:
1) EXCAVATE AREA 'A'	Audit Time:
2) STOCK PILE SOIL	
3) COVERING + UNCOVERING SOIL PILE	

Potential Hazards	Supervisor's Comments
1) STRUCK BY + AGAINST OVERHEAD WIRES	
2) STRUCK BY ROLLING SOIL	
3) STRAINS + SPRAINS SLIPS TRIPS FALLS	

Recommended Corrective Action or Procedure	Supervisor's Initials:
1) EYE CONTACT SWING RADIUS USE SPOTTER	
2) STAY CLEAR WHILE DUMPING	
3) GET HELP WATCH FOOTING	

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]	[illegible]	
[illegible]	Adam [illegible]	
[illegible]		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 6-15-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Abney
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X
	Assembly Point: **AS POSTED**	Revised:

Job Task (What are you doing?)	**Audit the Job:**
Excavate Area "A"	Audit Time:
Stockpile soil	
Potential Hazards	
Slip Trip Fall	
Pinch Points	Supervisor's Comments
Heavy Equip Ops	Cutting Devices
Over Head Wires	
Recommended Corrective Action or Procedure	
Proper PPE	
Eye contact w/operators	
Proper lifting techniques	Supervisor's Initials:

Crew Names/Signatures		
Steve Smith		
Henry Stigler		
Adam Freeburg		
[illegible]		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 6-16-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: H. STICKLE
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X
	Assembly Point: **AS POSTED**	Revised:

Job Task (What are you doing?)	Audit the Job:
1) FINISH EXCAVATION AREA 'A'	Audit Time:
2) BACK FILL AREAS 'B' & 'C'	
3) STOCK PILE SOIL	
4) E&S CONTROLS FOR WEEKEND	

Potential Hazards	Supervisor's Comments
1) STRUCK BY AGAINST CONGESTED AREA	
2) TRUCKS BACKING, TRAFFIC, STEEP EDGES	
3) ROLLING DIRT STRAINS + SPRAINS	
4) STRUCK BY, PINCH POINTS,	

Recommended Corrective Action or Procedure	Supervisor's Initials:
1) EYE CONTACT, KEEP CLEAR	
2) HIGH VIS VESTS, SPOTTERS, STAY BACK	
3) STAY CLEAR WHILE DUMPING, GET HELP	
4) WATCH SWING WEAR LEATHER GLOVES	

Crew Names/Signatures		
[illegible]		
[illegible]		
[illegible]		
[illegible]		
Adam Hershey		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 6-19-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Abney
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X Revised:
	Assembly Point: **AS POSTED**	

Job Task (What are you doing?)	**Audit the Job:**
Install Corrugated Pipe	Audit Time:
Check E&S Controls	
Potential Hazards	
Slip Trip Fall	
Pinch Points	Supervisor's Comments
Recommended Corrective Action or Procedure	
Proper PPE	
Eye Contact w/operators	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
Ed Abney	Jim Wright	

SUPERVISOR/FOREMAN: Cam Hernd

Job Safety Analysis

Date:

Job #: **115273**

Shaw Shaw Environmental, Inc.

6-20-06

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD (Unit/Location on Project)				
Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**		
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Abley		
		Are other crews in area? **YES**		
Pre-Job Preparation: 1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Wind Direction: Evacuation Route: **AS POSTED** Assembly Point: **AS POSTED**	New	X	
		Revised		

Job Task (What are you doing?)	**Audit the Job:**
Recieve & Stockpile Soil Gen. House Keeping	Audit Time:
Potential Hazards	
Slip Trip & Fall Pinch Points Hi Heat Index	Supervisor's Comments
Recommended Corrective Action or Procedure	
Proper PPE Hydrate Eye on work Area	Supervisor's Initials:

Crew Names/Signatures		
Cano Hernandez		
Ed Abley		
[illegible]		

SUPERVISOR/FOREMAN: _____

Job Safety Analysis

Date: 6.20.06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD (Unit/Location on Project)		
Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collas
		Are other crews in area? **YES**
Pre-Job Preparation: 1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Wind Direction: Evacuation Route: **AS POSTED** Assembly Point: **AS POSTED**	New: X Revised:

Job Task (What are you doing?)	**Audit the Job:**
Excavation - Area C Check Material handling Pad Check E&S Controls	Audit Time:
Potential Hazards	
Heavy Equipment Traffic - excavation in road Trip Fall hazards	Supervisor's Comments
Recommended Corrective Action or Procedure	
Communicate w/ operator - Stay out of swing radius Provide traffic control	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]	Jim WRIGHT	

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 6-21-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Ashley
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X
	Assembly Point: **AS POSTED**	Revised:

Job Task (What are you doing?)	**Audit the Job:**
EXCAVATE AREA C	Audit Time:
Stockpile MATERIAL	
Potential Hazards	
Heavy Equipment	Supervisor's Comments
TRAFFIC IN ROADWAY	
Slip Trip FALL	
Pinch Points	
Recommended Corrective Action or Procedure	
Eye Contact w/OPERATORS	
TRAFFIC CONTROL	
Watch your WORK AREA	Supervisor's Initials:

Crew Names/Signatures		
Steve Smith		
[illegible]		
[illegible]		
[illegible]		
[illegible]		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 6-23-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X
	Assembly Point: **AS POSTED**	Revised:

Job Task (What are you doing?)	**Audit the Job:**
Seed Bare spots on landfill - Site 42 Topsoil on Area B - site 57	Audit Time:
Potential Hazards	
Slip trip hazards Heavy Equipment	Supervisor's Comments
Recommended Corrective Action or Procedure	
Caution working on wet slope Communicate w/ operator	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Adam Forsberg	
[illegible]		
Steve Smith		
Jim Wright		
[illegible]		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 6/26/06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X Revised:
	Assembly Point: **AS POSTED**	

Job Task (What are you doing?)	Audit the Job:
Backfill area "A"	Audit Time:
Check E&S Controls	
Potential Hazards	
Wet contidions	
Slip trip hazards	Supervisor's Comments
Traffic	
Recommended Corrective Action or Procedure	
Caution on wet slopes	
watch for erosion in excavation walls	
Utilize traffic Controls	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]		
[illegible]		

SUPERVISOR/FOREMAN Dave Hernandez

Job Safety Analysis

Date: 6-27-06

Job #: **115273**

Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Hawley
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X Revised:
	Assembly Point: **AS POSTED**	

Job Task (What are you doing?)	Audit the Job:
Load Out Stockpile @ 57	Audit Time:

Potential Hazards

Muddy Conditions
Heavy Equipment
~~Mult~~ New Drivers on site

Recommended Corrective Action or Procedure

Watch your work Area
Eye Contact w/operators
Eye Contact w/ Drivers
PPE
Traffic Control

Supervisor's Comments

Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]	[illegible]	
[illegible]		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 6/28/06

Job #: **115273**

Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X Revised:
	Assembly Point: **AS POSTED**	

Job Task (What are you doing?)	**Audit the Job:**
Load out Stockpile	Audit Time:
Potential Hazards	
Slip, Trip Hazards (wet poly, wet roads) Traffic	Supervisor's Comments
Recommended Corrective Action or Procedure	
Watch footing covering, uncovering stockpile Utilize traffic controls	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]	[illegible]	
[illegible]	Antwan Flashway	

SUPERVISOR/FOREMAN: _____

Job Safety Analysis

Date: 6.30.06

Job #: ~~115273~~ 120357

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD (Unit/Location on Project)		
Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins
		Are other crews in area? **YES**
Pre-Job Preparation: 1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Wind Direction: Evacuation Route: **AS POSTED** Assembly Point: **AS POSTED**	New: X Revised:

Job Task (What are you doing?)	Audit the Job:
Backfill Area "A"	Audit Time:
Potential Hazards	
Heavy Equipment ops in confined area Heavy lifting (Plate Tampers) Traffic	Supervisor's Comments
Recommended Corrective Action or Procedure	
Utilize spotter for equipment & trucks use proper lifting technique	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]	Adam Hardney	

SUPERVISOR/FOREMAN: Carno Hernandez

Job Safety Analysis

Date: 7/1/06

Job #: ~~115273~~ 120359

Shaw Environmental, Inc.

Permit #:
Issued By:

7-01-06

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Don Hinkley
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X
	Assembly Point: **AS POSTED**	Revised:

Job Task
(What are you doing?)

DIRECTING TRUCKS DURING LOADOUT

Audit the Job:

Audit Time:

Potential Hazards

TRUCKS BACKING UP
TRAFFIC CONTROL
DRIVERS W/PPE

Supervisor's Comments

Recommended Corrective Action or Procedure

- PAY ATTENTION WHILE TRUCKS BACK UP WATCH FOR
- TWO PEOPLE SPOTTING ON ROAD ALONGSIDE SITE
- BEFORE DRIVERS EXIT THERE TRUCK NEED HARD HAT & SAFETY GLASS

Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]	[illegible]	
[illegible]	Adam Forsythe	

SUPERVISOR/FOREMAN: _____

Job Safety Analysis

Date: 7-7-06

Job #: ~~115273~~ 120359

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Abney
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X Revised:
	Assembly Point: **AS POSTED**	

Job Task (What are you doing?)	Audit the Job:
~~Back Fill Area "C"~~	Audit Time:
Pulling Silt Fence @ 42 (Area 1)	
Potential Hazards	
Slip Trip Fall	
Struck by/Against	Supervisor's Comments
Recommended Corrective Action or Procedure	
Proper PPE	
Eye Contact w/operators	Supervisor's Initials:

Crew Names/Signatures		
Ed Abney	Steve Smith	
[illegible]	Malcolm Frasher	
[illegible]		

SUPERVISOR/FOREMAN: Cane [illegible]

Job Safety Analysis

Date: 7/8/06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD (Unit/Location on Project)				
Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**		
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins		
		Are other crews in area? **YES**		
Pre-Job Preparation: 1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Wind Direction: Evacuation Route: **AS POSTED** Assembly Point: **AS POSTED**	New	X	
		Revised		

Job Task (What are you doing?)	**Audit the Job:**
Backfill Area 'C' Sweep roads	Audit Time:
Potential Hazards	
Traffic - excavation in road Heavy equipment operation Trip Fall hazards	Supervisor's Comments
Recommended Corrective Action or Procedure	
Utilize spotter for all activities Communicate w/ operator Keep work area clear of trip hazards	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]		

SUPERVISOR/FOREMAN: _____

Job Safety Analysis

Date: [redacted]

Job #: ~~115273~~ 120359

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD (Unit/Location on Project)		
Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins
		Are other crews in area? **YES**
Pre-Job Preparation: 1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Wind Direction: Evacuation Route: **AS POSTED** Assembly Point: **AS POSTED**	New: X Revised:

Job Task (What are you doing?)	**Audit the Job:**
Backfill Area "C"	Audit Time:
Potential Hazards	
Wet Conditions Slip trip Falls Traffic	Supervisor's Comments
Recommended Corrective Action or Procedure	
Spotter for equipment & trucks Caution entering/exiting excavation	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 7-10-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Henley
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X
	Assembly Point: **AS POSTED**	Revised:

Job Task (What are you doing?)	**Audit the Job:**
GRADING AREA "A"	Audit Time:
TOPSOIL ON AREA "B"	
CR6 ON AREAS "A" & "C"	
Potential Hazards	
SLIP TRIP FALL	
HEAVY EQUIP IN CLOSE QUARTERS	Supervisor's Comments
TRAFFIC WATCH	
Recommended Corrective Action or Procedure	
PROPER PPE	
EYE CONTACT W/ OPERATORS	
TRAFFIC CONTROL WHEN NECESSARY	Supervisor's Initials:
WATCH YOUR FOOTING	

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]		
[illegible]		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 7-11-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X Revised:
	Assembly Point: **AS POSTED**	

Job Task (What are you doing?)	**Audit the Job:**
Grade Area 'A' - Topsoil, CR-6	Audit Time:
Site Restoration	
Load Debris in rolloff	
Potential Hazards	
Trip Fall hazards	
Heavy Equipment operation	Supervisor's Comments
Lifting	
Recommended Corrective Action or Procedure	
keep work area clear of trip hazards	
Wear reflective vests - Communicate w/operator	
Use Proper lifting technique	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]		
[illegible]		

SUPERVISOR/FOREMAN: Carol Bernard

Job Safety Analysis

Date: 7/12/06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X Revised:
	Assembly Point: **AS POSTED**	

Job Task (What are you doing?)	**Audit the Job:**
Remove Asphalt Grade Areas "A" & "C"	Audit Time:
Potential Hazards	
Heavy Equipment operation Traffic Trip Fall hazards	Supervisor's Comments
Recommended Corrective Action or Procedure	
Utilize spotter for All equipment operation Keep work Areas clear of trip hazards	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]		
[illegible]		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date:

Job #: **115273**

Shaw Shaw Environmental, Inc.

7-13-06

Permit #:
Issued By: CH

Location of Job : INDIAN HEAD, MD (Unit/Location on Project)				
Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: ~~B. Harris~~ CH		
	Safe Haven: **TRAILER**	JSA Prepared By: Chad H		
		Are other crews in area? **YES**		
Pre-Job Preparation: 1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Wind Direction: Evacuation Route: **AS POSTED** Assembly Point: **AS POSTED**	New	X	
		Revised		

Job Task (What are you doing?)	**Audit the Job:**
Site Restoration Seed - Straw Loading Hovely Truck (1) Move Gazebo	Audit Time:
Potential Hazards	
Slip Trip & Fall -Heat- Pinch Points	Supervisor's Comments
Recommended Corrective Action or Procedure	
Use spotter when Backing Trucks Stay away from under bucket when loading Traffic Control	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]	[illegible]	

SUPERVISOR/FOREMAN: Chad Hernandez

Job Safety Analysis

Date: 7-14-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD (Unit/Location on Project)				
Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**		
	Safe Haven: **TRAILER**	JSA Prepared By: Tom Hurley		
		Are other crews in area? **YES**		
Pre-Job Preparation: 1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Wind Direction: Evacuation Route: **AS POSTED** Assembly Point: **AS POSTED**	New	X	
		Revised		

Job Task (What are you doing?)	**Audit the Job:**
Move Gazebo Load out Asphalt Clean road	Audit Time:
Potential Hazards	
Traffic Heavy Equipment ops	Supervisor's Comments
Recommended Corrective Action or Procedure	
Spotter for Trucks & Equipment Wear Proper PPE	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]		

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 7-17-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD (Unit/Location on Project)		
Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Abney Are other crews in area? **YES**
Pre-Job Preparation: 1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Wind Direction: Evacuation Route: **AS POSTED** Assembly Point: **AS POSTED**	New: X Revised:

Job Task (What are you doing?)	**Audit the Job:**
	Audit Time:
Potential Hazards	
Heat Advisory: ~~Temps~~ Index > 100°F	Supervisor's Comments
Recommended Corrective Action or Procedure	
Hydrate Watch your Buddy	Supervisor's Initials:

Crew Names/Signatures		
Ed Abney	Steve Smith	

SUPERVISOR/FOREMAN:

Job Safety Analysis

Date: 7-18-06

Job #: **115273**

Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**		
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Abney		
		Are other crews in area? **YES**		
Pre-Job Preparation:	Wind Direction:			
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New	X	
	Assembly Point: **AS POSTED**	Revised		

Job Task (What are you doing?)	Audit the Job:
Loading / Moving Roll offs	Audit Time:
Cleaning Laydown Area	
Decon Equipment	
Potential Hazards	
Hi Heat Index	Supervisor's Comments
Tight Quarters w/ moving equipment	
TRAFFIC on ROADWAY	
Recommended Corrective Action or Procedure	
Fluids	
Eyes on operators & Drivers	
Proper PPE	Supervisor's Initials:

Crew Names/Signatures		
Ed Abney	Steve Smith	
	Tony [illegible]	

SUPERVISOR/FOREMAN: [illegible]

Job Safety Analysis

Date: 7-19-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins
	Wind Direction:	Are other crews in area? **YES**
Pre-Job Preparation: 1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED** Assembly Point: **AS POSTED**	New: X Revised:

Job Task (What are you doing?)	Audit the Job:
Clean Parking lot Asphalt	Audit Time:
Potential Hazards	
Heavy equipment Traffic Heat stress	Supervisor's Comments
Recommended Corrective Action or Procedure	
Utilize spotters for equipment - esp. on road Take breaks - Drink plenty of fluids	Supervisor's Initials:

Crew Names/Signatures		
[illegible]	Steve Smith	
[illegible]	Duane Murray	
[illegible]	Joseph James	
[illegible]	[illegible]	

SUPERVISOR/FOREMAN: _____

Job Safety Analysis

Date: 7-20-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD (Unit/Location on Project)				
Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**		
	Safe Haven: **TRAILER**	JSA Prepared By: Tim Collins		
		Are other crews in area? **YES**		
Pre-Job Preparation: 1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Wind Direction: Evacuation Route: **AS POSTED** Assembly Point: **AS POSTED**	New	X	
		Revised		

Job Task (What are you doing?)	**Audit the Job:**
Clean Parking lot, Road	Audit Time:
Potential Hazards	
Heat stress Traffic	Supervisor's Comments
Recommended Corrective Action or Procedure	
Take Break when needed - Drink Plenty of fluids Spotter when working in road	Supervisor's Initials:

Crew ~~Names~~/Signatures		

SUPERVISOR/FOREMAN:

Job Safety Analysis

Date: 7-21-06

Job #: **115273**

Shaw Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Abney
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X
	Assembly Point: **AS POSTED**	Revised:

Job Task (What are you doing?)	**Audit the Job:**
CLEAN PARKING LOT DECON EQUIP FUEL EQUIPMENT & STAGE FOR DEMOBE	Audit Time:
Potential Hazards	
HIGH HEAT INDEX TRAFFIC	Supervisor's Comments
Recommended Corrective Action or Procedure	
HYDRATE & TAKE BREAKS WATCH YOUR SURROUNDINGS	Supervisor's Initials:

Crew Names/Signatures		
Ed Abney		

SUPERVISOR/FOREMAN:

Job Safety Analysis

Date: 7-22-06

Job #: **115273**

Shaw Environmental, Inc.

Permit #:
Issued By:

Location of Job : INDIAN HEAD, MD
(Unit/Location on Project)

Required PPE: **LEVEL D**	**Safety Access/Location**	Supervisor or Work: **B. Harris**
	Safe Haven: **TRAILER**	JSA Prepared By: Ed Abney
		Are other crews in area? **YES**
Pre-Job Preparation:	Wind Direction:	
1. Fill Out JSA 2. Review JSA (crew) 3. Sign JSA (crew)	Evacuation Route: **AS POSTED**	New: X
	Assembly Point: **AS POSTED**	Revised:

Job Task (What are you doing?)	**Audit the Job:**
Clean Parking Lot & Street Clean Equipment For Demobe	Audit Time:
Potential Hazards	
High Heat Index T-Storms Traffic	Supervisor's Comments
Recommended Corrective Action or Procedure	
Hydrate Watch the weather Watch your work area	Supervisor's Initials:

Crew Names/Signatures		
Ed Abney		

SUPERVISOR/FOREMAN:

SECTION 3.0
DAILY
SIGN-IN/SIGN-OUT LOGS

Sign In/Out Log
Shaw Environmental and Infrastructure, Inc.
Field Support Services Inc.
Site #42 and #17
Indian Head, MD
Project # 115273
T.O. 011

DATE: 5-30-06

Name (print / sign)	Organization	Time in	Time out
Bill Simpson Bill Simp	FSSI	10:00	1700
Brian Harris	Shaw		
Bryan Guzzardo	Shaw		
Ed Abney	Shaw		
Frank Smail	FSSI		
John Sparks	Shaw		
Kent Phillips	Shaw		
Marcella Wallace	Shaw		
Patti Gamble	Shaw		
Steve Carriere	Shaw		
Steve Smith Steve Smith	FSSI	11:00	
Tim Collins	Shaw	1230	1730
Tom Hurley	Shaw	13:00	
Cano Hernandez	Shaw	11:31	

Sign In/Out Log
Shaw Environmental and Infrastructure, Inc.
Field Support Services Inc.
Site #42 and #17
Indian Head, MD
Project # 115273
T.O. 011

Shaw

DATE: 5-31-06

Name (print / sign)	Organization	Time in	Time out
Bill Simpson	FSSI	0545	1700
Brian Harris	Shaw		
Bryan Guzzardo	Shaw		
Ed Abney	Shaw	0630	
Frank Smail	FSSI		
John Sparks	Shaw		
Kent Phillips	Shaw		
Marcella Wallace	Shaw		
Patti Gamble	Shaw		
Steve Carriere	Shaw	0600	
Steve Smith	FSSI	0600	1730
Tim Collins	Shaw	0630	1730
Tom Hurley	Shaw	0630	
CARL HERNANDEZ	SHAW	0630	1800
ADAM FORSHEY	SHAW	0630	1830
JIM WRIGHT H & S	SHAW E & I	0930	

Sign In/Out Log
Shaw Environmental and Infrastructure, Inc.
Field Support Services Inc.
Site #42 and #17
Indian Head, MD
Project # 115273
T.O. 011

DATE: 6-1-06

Name (print / sign)	Organization	Time in	Time out
Bill Simpson	FSSI	0625	1700
Brian Harris	Shaw		
Bryan Guzzardo	Shaw		
Ed Abney	Shaw	0630	1730
Frank Smail	FSSI		
John Sparks	Shaw		
Kent Phillips	Shaw		
Marcella Wallace	Shaw		
Patti Gamble	Shaw		
Steve Carriere	Shaw		
Steve Smith	FSSI	0600	1730
Tim Collins	Shaw	0630	
Tom Hurley	Shaw		
Camo Hernandez	Shaw	0630	
ADAM FORSHEY	SHAW	0630	
JIM WRIGHT	SHAW	0600	

Sign In/Out Log
Shaw Environmental and Infrastructure, Inc.
Field Support Services Inc.
Site #42 and #17
Indian Head, MD
Project # 115273
T.O. 011

DATE: 6-02-04

Name (print / sign)	Organization	Time in	Time out
Bill Simpson Bill Sim	FSSI	0500	1530
Brian Harris Brian Harris	Shaw	0900	
Bryan Guzzardo	Shaw		
Ed Abney Ed Abney	Shaw	0600	
Frank Smail	FSSI		
John Sparks	Shaw		
Kent Phillips	Shaw		
Marcella Wallace	Shaw		
Patti Gamble Patricia M Gamble	Shaw	0630	
Steve Carriere	Shaw	0600	
Steve Smith Steve Smith	FSSI	0530	1730
Tim Collins	Shaw	0600	1730
Tom Hurley	Shaw		
Jim WRIGHT	SHAW	0600	1730
Cano Hernandez	SHAW	0600	1730
ADAM FORSHEY	SHAW	0600	1600

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-5-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0730	1700
Ed Abney	Shaw E&I	0630	1800
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0630	1800
Tim Collins	Shaw E&I	0700	1800
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I	0645	1745
Adam Forshey	Shaw E&I	1030	
Henry Stickle	Shaw E&I	0700	
Cano Hernandez	Shaw E&I	0700	
Bill Kimes	SSS	07:15	10:00
Scott Smyth	Smyth	850	350
Scott Smyth	Smyth	850	350
R Cahilder			350

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-6-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0600	1630
Ed Abney	Shaw E&I	0630	1800
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0630	1730
Tim Collins	Shaw E&I	0700	1730
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I	6:45	
Adam Forshey	Shaw E&I	0630	
Henry Stickle	Shaw E&I	0630	1800
Cano Hernandez	Shaw E&I	0630	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-7-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0600	1630
Ed Abney	Shaw E&I	0630	
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0630	1730
Tim Collins	Shaw E&I	0630	1730
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I	0630	1745
Adam Forshey	Shaw E&I	0630	
Henry Stickle	Shaw E&I	1000	1730
Cano Hernandez	Shaw E&I	1000	
Kym Edelman	Shaw	1015	1730

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-8-07

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0600	1700
Ed Abney	Shaw E&I	0645	1830
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0630	1830
Tim Collins	Shaw E&I	0700	1830
Tom Hurley	Shaw E&I		
Jim ~~Weight~~ WRIGHT	Shaw E&I	0630	1815
Adam Forshey	Shaw E&I	0630	
Henry Stickle	Shaw E&I	0650	1830
Cano Hernandez	Shaw E&I	0630	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-9-07

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson Bill Simpson	FSSI	0600	1200
Ed Abney Ed Abney	Shaw E&I	0640	1730
Kent Phillips	Shaw E&I	0745	
Steve Carriere	Shaw E&I		
Steve Smith Steve Smith	FSSI	0630	1630
Tim Collins Tim Collins	Shaw E&I	0700	1630
Tom Hurley	Shaw E&I		
Jim ~~Weight~~ WRIGHT	Shaw E&I	0630	1730
Adam Forshey Adam Forshey	Shaw E&I	0700	
Henry Stickle [illegible]	Shaw E&I	0630	1730
Cano Hernandez [illegible]	Shaw E&I	0630	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6/10/00

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	0700	1300
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI		
Tim Collins	Shaw E&I	0700	1300
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I		

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-12-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0645	
Ed Abney	Shaw E&I	0645	1000
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0630	
Tim Collins	Shaw E&I	0700	1000
Tom Hurley	Shaw E&I		
Jim ~~Weight~~ WRIGHT	Shaw E&I	0630 1430	0830 1700
Adam Forshey	Shaw E&I	1030	
Henry Stickle	Shaw E&I	0630	1000
Cano Hernandez	Shaw E&I	0715	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-13-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	0700	1730
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0630	1730
Tim Collins	Shaw E&I	0700	
Tom Hurley	Shaw E&I	0700	1730
Jim ~~Weight~~ WRIGHT	Shaw E&I	0630	1800
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I	0650	1730
Cano Hernandez	Shaw E&I	1630	
John Schmit	Gradient	1000	1245
Paul L. Miller	Gradient	1000	1245

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-14-06

Name (print / sign)	Organization	Time In	Time Out ?
Bill Simpson	FSSI	0630	1630
Ed Abney	Shaw E&I	0700	1730
Kent Phillips	Shaw E&I	0800	
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0645	1730
Tim Collins	Shaw E&I	0700	1730
Tom Hurley	Shaw E&I	0700	
Jim ~~Weight~~ WRIGHT	Shaw E&I	0630	1645
Adam Forshey	Shaw E&I	0700	
Henry Stickle	Shaw E&I	0630	1730
Cano Hernandez	Shaw E&I	0630	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-15-06

Name (print / sign)	Organization	Time In	Time Out ?
Bill Simpson	FSSI	0600	1500
Ed Abney	Shaw E&I	0700	1730
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0630	1730
Tim Collins	Shaw E&I	0700	1730
Tom Hurley	Shaw E&I	0700	1730
Jim ~~Weight~~ CORIGHT	Shaw E&I	0630	
Adam Forshey	Shaw E&I	0630	
Henry Stickle	Shaw E&I	0630	1730
Cano Hernandez	Shaw E&I	0700	1730

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-16-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0600	
Ed Abney	Shaw E&I	0630	1730
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI		
Tim Collins	Shaw E&I	0700	1730
Tom Hurley	Shaw E&I	0700	1730
Jim ~~Weight~~ WRIGHT	Shaw E&I	0630	1300
Adam Forshey	Shaw E&I	0700	
Henry Stickle	Shaw E&I	0630	
Cano Hernandez	Shaw E&I	0630	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-17-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	0700	1300
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI		
Tim Collins	Shaw E&I	0700	1300
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	1300

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-19-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0700	1600
Ed Abney	Shaw E&I	0645	1730
Kent Phillips	Shaw E&I	1100	
Steve Carriere	Shaw E&I	—	—
Steve Smith	FSSI	0630	1730
Tim Collins	Shaw E&I	0700	1730
Tom Hurley	Shaw E&I		
Jim ~~Weight~~ WRIGHT	Shaw E&I	0630	1730
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0630	1730

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-20-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0600	1630
Ed Abney	Shaw E&I	0645	
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0645	1600
Tim Collins	Shaw E&I	0700	1100
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0615	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-21-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson Bill Simpson	FSSI	0630	1630
Ed Abney Ed Abney	Shaw E&I	0645	1730
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith Steve Smith	FSSI	0630	1700
Tim Collins Tim Collins	Shaw E&I	0700	1730
Tom Hurley Tom Hurley	Shaw E&I	0700	1730
Jim ~~Weight~~ WRIGHT J Wright	Shaw E&I	0630	1730
Adam Forshey Adam Forshey	Shaw E&I	0700	1730
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0630	1730

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-23-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0600	
Ed Abney	Shaw E&I	0645	1800
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0630	1800
Tim Collins	Shaw E&I	0700	1800
Tom Hurley	Shaw E&I	0700	1800
Jim ~~Weight~~ WEIGHT	Shaw E&I	0630	
Adam Forshey	Shaw E&I	0630	
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0701	1730

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6.26.06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	0645	
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith Steve Smith	FSSI	0630	
Tim Collins	Shaw E&I	0630	1000
Tom Hurley	Shaw E&I		
Jim ~~Weight~~ CWRIGHT	Shaw E&I	0630	
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0630	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-27-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson Bill Simpson	FSSI	0600	1630
Ed Abney Ed Abney	Shaw E&I	0645	
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith Steve Smith	FSSI	0630	
Tim Collins Tim Collins	Shaw E&I	0700	
Tom Hurley Tom Hurley	Shaw E&I	0700	
Jim ~~Weight~~ WRIGHT	Shaw E&I	0630	
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0715	1530

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-28-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson Bill Simpson	FSSI	0600	1730
Ed Abney Ed Abney	Shaw E&I	0645	1730
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith Steve Smith	FSSI	0630	1730
Tim Collins	Shaw E&I	0700	1730
Tom Hurley Tom Hurley	Shaw E&I	0700	
Jim ~~Weight~~ WRIGHT	Shaw E&I	0630	
Adam Forshey Adam Forshey	Shaw E&I	0700	1730
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I		

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-29-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0600	1730
Ed Abney	Shaw E&I	0645	1730
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0630	1730
Tim Collins	Shaw E&I	0700	1730
Tom Hurley	Shaw E&I	0700	1730
Jim ~~Weight~~ Wright	Shaw E&I	0630	1545
Adam Forshey	Shaw E&I	0700	1730
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I		

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 6-30-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson Bill Simp	FSSI	0615	11:30
Ed Abney	Shaw E&I		
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith Steve Smith	FSSI	0630	
Tim Collins	Shaw E&I	0700	
Tom Hurley Tom Hurley	Shaw E&I	0700	
Jim Weight	Shaw E&I		
Adam Forshey Adam Forshey	Shaw E&I	0700	
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I		

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

7-01-06

Date: 6-I-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I		
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI		
Tim Collins	Shaw E&I	0700	
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 16-05-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	1300	1730
Kent Phillips	Shaw E&I	1300	
Steve Carriere	Shaw E&I		
Steve Smith	FSSI		
Tim Collins	Shaw E&I	0700	1730
Tom Hurley	Shaw E&I	0700	1730
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I	0700	
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7-6-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	0645	1730
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0630	1730
Tim Collins	Shaw E&I	0700	1730
Tom Hurley	Shaw E&I	0700	1730
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I	0700	
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7/7/06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	0645	1530
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0700	1530
Tim Collins	Shaw E&I	0700	1530
Tom Hurley	Shaw E&I	0700	
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I	0700	
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7/8/06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	0645	1330
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0630	
Tim Collins	Shaw E&I	0700	1330
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I		

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7-10-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0645	
Ed Abney	Shaw E&I	0645	1530
Kent Phillips	Shaw E&I	1100	
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0645	
Tim Collins	Shaw E&I	0700	1530
Tom Hurley	Shaw E&I	0700	1530
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7-11-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	0645	1730
Kent Phillips	Shaw E&I	0700	1830
Steve Carriere	Shaw E&I	0700	1830
Steve Smith	FSSI	0630	1730
Tim Collins	Shaw E&I	0700	1730
Tom Hurley	Shaw E&I	0700	1730
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7/12/06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0630	
Ed Abney	Shaw E&I	0645	1730
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0645	1730
Tim Collins	Shaw E&I	0700	1730
Tom Hurley	Shaw E&I	0700	1730
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7-14-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0545	
Ed Abney	Shaw E&I	0640	1830
Kent Phillips	Shaw E&I	0700	
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0615	1830
Tim Collins	Shaw E&I	0700	1830
Tom Hurley	Shaw E&I	0700	1830
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	1830

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7-17-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	0645	1530
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0645	1530
Tim Collins	Shaw E&I	1100	1530
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	1700

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7-18-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0615	
Ed Abney	Shaw E&I	0630	1530
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0645	1530
Tim Collins	Shaw E&I	0700	1530
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7-19-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI	0645	
Ed Abney	Shaw E&I	0630	1630
Kent Phillips	Shaw E&I	0705	
Steve Carriere	Shaw E&I		
Steve Smith	FSSI	0630	
Tim Collins	Shaw E&I	0700	1630
Tom Hurley	Shaw E&I	—	—
Jim Weight	Shaw E&I	—	—
Adam Forshey	Shaw E&I	—	—
Henry Stickle	Shaw E&I	—	—
Cano Hernandez	Shaw E&I	0800	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7-20-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	0700	1730
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI		
Tim Collins	Shaw E&I	0700	1730
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0710	1730

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7-21-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	0700	1630
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI		
Tim Collins	Shaw E&I		
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	

Sign In/Out Log

Shaw E&I
Field Support Services Inc.
Site # 57
Project # 120 359
T.O. 25
Indian Head, Maryland

Date: 7-22-06

Name (print / sign)	Organization	Time In	Time Out
Bill Simpson	FSSI		
Ed Abney	Shaw E&I	0700	1200
Kent Phillips	Shaw E&I		
Steve Carriere	Shaw E&I		
Steve Smith	FSSI		
Tim Collins	Shaw E&I		
Tom Hurley	Shaw E&I		
Jim Weight	Shaw E&I		
Adam Forshey	Shaw E&I		
Henry Stickle	Shaw E&I		
Cano Hernandez	Shaw E&I	0700	1200

SECTION 4.0
SAFETY MEETING
LOGS

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 5-30-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: Mob / site set up

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: N/A

Physical Hazards: Lifting, Slip / Trip / Falls, Heat

Personal Protective Equipment:

Activity: All **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Steve Smith	Steve Smith
Tim Collins	[illegible]
Tom Hurley	[illegible]
Carlo Hernandez	[illegible]

Meeting Conducted by: Bill Sing

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 5-31-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: Site Set up

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: ~~VEHICLE TRAFFIC~~ DUST

Physical Hazards: LIFTING, SLIP / TRIP / FALLS, MOVING EQUIPMENT VEHICLE TRAFFIC

Personal Protective Equipment:

Activity: Site set up **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Tim Collins	
STEVE Smith	Steve Smith
Ed Abney	
Don Hurley	
Cano Hernandez	
ADAM FORSHEY	Adam Forshey
Steve Carrier	
Jim WRIGHT	

Meeting Conducted by: Bill Sing

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

0700

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-1-06 **Time:** ~~0630~~

Client: FSSI / NAVY

Work Activities: Site set up / INSTALL E&S

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: LIFTING, MOVING HEAVY EQUIPMENT, SLIP / TRIP / FALL

Personal Protective Equipment:

Activity: Set up **PPE Level:** D

Activity: E&S **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
STEVE Smith	Steve Smith
Jim Collins	[illegible]
Ed Abney	[illegible]
Cano Hernandez	[illegible]
ADAM FORSHEY	Adam Forshey

Meeting Conducted by: Bill Sc[illegible]

N - 1

Shaw™
SHAW E & I, Inc.
Indian Head, Md

TAILGATE SAFETY MEETING

DIVISION / SUBSIDIARY : The Shaw Group Inc FACILITY : 5700 Thurston Ave., Suite 116, Virginia Beach, Va.

DATE : 6-1-06 Thues TIME : ~~0600~~ 0630 JOB NUMBER : 120359

CUSTOMER Naval Facilities Engineering Command ADDRESS : 1314 Harwood Street, Washington Navy Yard, D.C.

SPECIFIC LOCATION : Site 57, Naval Support Facility, Indian Head, Maryland

TYPE OF WORK : INSTALLING SILT & ORANGE SAFETY FENCING @ AREA'S A, B & C, GENERAL SITE MAINT.

CHEMICALS USED : Gasoline, Diesel

SAFETY TOPICS PRESENTED

SAFETY TOPICS : HS-308, THUNDER & LIGHTNING

WEATHER : PARTLY CLOUDY, 40% of T-STORMS IN AFTERNOON TEMP MID 80's WINDS SW @ 10-15

PROTECTIVE CLOTHING/EQUIPMENT : **LEVEL D** : Steel toe boots, Safety eye glasses (ANSI approved), Hard hat, Hearing protection (Muffs & or ear plugs w/minimal NRR 30 rating.), **MODIFIED D**: Same as D plus steel toe PVC boots, blueTyvek, Latex (inner) & nitrile (outer) gloves, metatarsals & poly rain gear (pressure washing)
LEVEL C : all of the above plus Full face or 1/2 face APR with OV/acid gas/P100 HEPA cartridges.

CHEMICAL HAZARDS : Dust, Fuels

PHYSICAL HAZARDS : SLIPS, TRIPS & FALL, lifting (60lbs), Heat Stress, Electrical, Noise (8Hr. PNEL, 90 db). Trenching/excavation, Vehicle-moving operations, Thunder & Lightning, Pinch Points

EMERGENCY PROCEDURES : Treat & Transport, if unable; call 911

HOSPITAL : Civista Medical Ctr PHONE : 301-609-4000 ADDRESS 701 E. St. Charles St., La Plata, Md
HEALTH RESOURCES : **Convenient Health Care** PHONE : 301-645-8550 ADDRESS 12090 Old Line Ctr., Waldorf, Md
PARAMEDIC PHONE : **911** or 301-744-4333

SPECIAL EQUIPMENT :

NOTE : The use of **any tool** that will produce a spark (Chopsaw, Air hammer. Etc.) requires the the use a face shield, a fire watch and a hot work permit.

ATTENDEES

NAME PRINTED	COMPANY	SIGNATURE
CANO HERNANDEZ	SHAW E-I	[signature]
ADAM FORSHEY	SHAW E&I	[signature]
ED ALVEY	SHAW E&I	[signature]
STEVE SMITH	FSSI	[signature]
BILL SIMPSON	FSSI	[signature]
TIM COLLEDS	SHAW E&I	[signature]
(over)	(over)	(over)

MEETING CONDUCTED BY: Jim Wright ~ SHSO SUPERINTENDENT : CANO HERNANDEZ

SIGNATURE [signature] SIGNATURE [signature]

N - 1

Shaw™
SHAW E & I, Inc.
Indian Head, Md

TAILGATE SAFETY MEETING

DIVISION / SUBSIDIARY : The Shaw Group Inc FACILITY : 5700 Thurston Ave., Suite 116, Virginia Beach, Va.

DATE : 6-2-06 FRI TIME : 0600 JOB NUMBER : 120359

CUSTOMER Naval Facilities Engineering Command ADDRESS : 1314 Harwood Street, Washington Navy Yard, D.C.

SPECIFIC LOCATION : Site 57, Naval Support Facility, Indian Head, Maryland

TYPE OF WORK : INSTALLING SILT & HIGH VIS FENCING, SITE MAINT

CHEMICALS USED : Gasoline, Diesel

SAFETY TOPICS PRESENTED

SAFETY TOPICS : DRIVING

WEATHER : SOME RAIN & T-STORMS @ TIMES, TEMP 68-80 °F

PROTECTIVE CLOTHING/EQUIPMENT : **LEVEL D** : Steel toe boots, Safety eye glasses (ANSI approved), Hard hat, Hearing protection (Muffs & or ear plugs w/minimal NRR 30 rating.), **MODIFIED D**: Same as D plus steel toe PVC boots, blueTyvek, Latex (inner) & nitrile (outer) gloves, metatarsals & poly rain gear (pressure washing)
LEVEL C : all of the above plus Full face or 1/2 face APR with OV/acid gas/P100 HEPA cartridges.

CHEMICAL HAZARDS : Dust, Fuels

PHYSICAL HAZARDS : SLIPS, TRIPS & FALL, lifting (60lbs), Heat Stress, Electrical, Noise (8Hr. PNEL, 90 db). Trenching/excavation, Vehicle-moving operations, Thunder & Lightning, Pinch Points

EMERGENCY PROCEDURES : Treat & Transport, if unable; call 911

HOSPITAL : Civista Medical Ctr PHONE : 301-609-4000 ADDRESS 701 E. St. Charles St., La Plata, Md
HEALTH RESOURCES : **Convenient Health Care** PHONE : 301-645-8550 ADDRESS 12090 Old Line Ctr., Waldorf, Md
PARAMEDIC PHONE : **911** or 301-744-4333

SPECIAL EQUIPMENT :

NOTE : The use of **any tool** that will produce a spark (Chopsaw, Air hammer. Etc.) requires the the use a face shield, a fire watch and a hot work permit.

ATTENDEES

NAME PRINTED	COMPANY	SIGNATURE
STEVE SMITH	FSSI	Steve Smith
BILL SIMPSON	FSSI	Bill Sim
Jim Collas	SHAW	[illegible]
Cano Hernandez	SHAW	[illegible]
Ed Abbey	SHAW	[illegible]
Steve Carrione	SHAW	[illegible]
ADAM FORSHEY	SHAW	Adam Forshey
PATTI GAMBLE	SHAW	Patricia M Gamble

(over) (over) (over)

MEETING CONDUCTED BY: Jim Wright ~ SHSO SUPERINTENDENT : Cano Hernandez

SIGNATURE [signature] SIGNATURE [signature]

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6 2 06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: Site set up, install E+S

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: Lifting, Moving Equipment, Slip, Trip, Fall

Personal Protective Equipment:

Activity: E+S **PPE Level:** D

Activity: Set up **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s): Walk Through at Site 42 + 17

Attendees

NAME PRINTED	SIGNATURE
Tim Collins	[illegible]
Jim Wright	[illegible]
Steve Smith	Steve Smith
Carlos Hernandez	[illegible]
Ed Abney	[illegible]
Steve Lawrence	[illegible]
Adam Forshey	Adam Forshey
Patti Gamble	Patricia McGamble

Meeting Conducted by: Bill Sing

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-5-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: SITE 57, LAY-DOWN YARD

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: DUST, GASOLINE, DIESEL

Physical Hazards: SLIP, TRIP & FALL,

Personal Protective Equipment:

Activity: LAY-DOWN YARD CONSTRUCTION **PPE Level:** D

Activity: STAGING EQUIPMENT **PPE Level:** D

Activity: WELL ABANDONMENT **PPE Level:** D

Activity: **PPE Level:**

New Equipment: CONCRETE SAW CUTTER

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Howard Stickard	[illegible]
Jim WRIGHT	[illegible]
Bill KIMES	Bill Kimes
ADAM FORSHEY	Adam Forshey
STEVE SMITH	Steve Smith
	office

Meeting Conducted by: Carc [illegible]

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-6-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: Finish E+S, install Decon pad. build material pad

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: Gas / Fuel

Physical Hazards: Slip / Trip / Fall, Lifting, Moving Equipment

Personal Protective Equipment:

Activity: E+S **PPE Level:** D

Activity: Decon Pad **PPE Level:** D

Activity: Material Pad **PPE Level:** D

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s): NAVY Safety Audit TODAY

Attendees

NAME PRINTED	SIGNATURE
Ed Abaley	
Steve Smith	
Jim Collins	
Carl Leonhardt	
Adam Forshey	
Henry Stone	
Jim Wright	H & S

Meeting Conducted by: Bill Sung

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-7-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: Finish Material Pad, Begin Excavation

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: Fuel / Gas / Oil

Physical Hazards: Excavation, Slip Trip Fall Moving Equipment

Personal Protective Equipment:

Activity: Pad **PPE Level:** D

Activity: Excavation **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s): Air Mont.

Attendees

NAME PRINTED	SIGNATURE
Tim Collins	[signature]
Steve Smith	[signature]
Ed Abney	[signature]
Henry Stewart	[signature]
Adam Forsney	[signature]
Jim Wright	[signature]
Chris Hearn	[signature]

Meeting Conducted by: Bill Sing

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-8-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: Excavate Area B

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: GAS / Oil / Fuel

Physical Hazards: Moving Equipment, Open Excavations Slip, Trip, Fall

Personal Protective Equipment:

Activity: Excavate **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Tim Collins	[illegible]
Henry Stichel	[illegible]
Steve Smith	Steve Smith
Carlo Hernandez	[illegible]
Ed Haley	[illegible]
Adam Forshey	Adam Forshey
Jim Wright	Jim Wright

Meeting Conducted by: Bill Sy

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-9-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: Excavate "A"

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: Fuel / Oil / Gas

Physical Hazards: Open Excavations, Moving Equipment Slip Trip Fall

Personal Protective Equipment:

Activity: Excavate Area A **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s): Heat stress

Attendees

NAME PRINTED	SIGNATURE
Hensun Stickle	[illegible]
Tim Collins	[illegible]
Steve Smith	Steve Smith
Cano Hernandez	[illegible]
Ed Abney	[illegible]
Adam Forsney	Adam Forsney
Jim Wright H & S	[illegible]

Meeting Conducted by: Bill Seamy

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-12-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: Excavate "C" Check E+S

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: GAS / OIL / FUEL

Physical Hazards: MOVING EQUIPMENT, SLIP, TRIP, FALL OPEN EXCAVATION

Personal Protective Equipment:

Activity: Excavate **PPE Level:** D

Activity: E+S **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
STEVE Smith	Steve Smith
Ed Abney	[illegible]
HENRY STICKLE	[illegible]
JIM WRIGHT	[illegible]
Tim Collins	[illegible]
Dave Hernandez	[illegible]
ADAM FORSHEY	Adam Forshey

Meeting Conducted by: Bill Smith

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6/13/06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: EXCAVATE "C" STOCKPILE SOIL CHECK E&S

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: GAS, OIL, DIESEL

Physical Hazards: MOVING EQUIPMENT ROAD TRAFFIC OPEN HOLES SLIP TRIPS FALLS CUTS AND PUNCTURES

Personal Protective Equipment:

Activity: EXCAVATE **PPE Level:** D

Activity: STOCKPILE **PPE Level:** D

Activity: E&S **PPE Level:** D

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Henry Stokes	[illegible]
Ed Abney	[illegible]
Jim Collier	[illegible]
Tom Hurley	[illegible]
Steve Smith	Steve Smith
Jim Wright H&S	[illegible]

Meeting Conducted by:

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-14-06 **Time:** 0700 ~~0630~~

Client: FSSI / NAVY

Work Activities: Excavate A

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: Fuel / Oil / GAS

Physical Hazards: OPEN Excavation, MOVING Equipment
Slip / Trip / Fall

Personal Protective Equipment:

Activity: Excavation **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
JIM WRIGHT	[illegible]
STEVE Smith	Steve Smith
Henry Stokes	[illegible]
Tim Collins	[illegible]
Ed Abney	[illegible]
[illegible]	[illegible]
Cano Hernandez	[illegible]
ADAM FORSCHEY	Adam Forschey

Meeting Conducted by: Bill Sing

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-15-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: Excavate "A"

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: DUST

Physical Hazards: Slip Trip Fall, Open Excavation Moving Equipment Lifting

Personal Protective Equipment:

Activity: Excavation **PPE Level:** D

Activity: Traffic Control **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
STEVE SMITH	Steve Smith
HENRY STACKS	[illegible]
Ron [illegible]	[illegible]
Ed Abley	Edward Abley
CANO HERNANDEZ	[illegible]
JIM WRIGHT	[illegible]
Jim Collins	[illegible]
ADAM FORSHER	Adam Forsher

Meeting Conducted by: Bill Sey

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-16-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: FINISH AREA "A" BACK FILL B+C

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: MOVING EQUIPMENT, OPEN EXCAVATIONS SLIP TRIP FALL, TRAFFIC CONTROL

Personal Protective Equipment:

Activity: EXCAVATE **PPE Level:** D

Activity: BACK FILL **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Henry Sacks	[illegible]
Ed Abney	Ed Abney
Tim Collins	[illegible]
Chris Hernandez	[illegible]
Tom Harley	[illegible]
Adam Forsney	Adam Forsney
Brice Hunt	Brice Hunt

Meeting Conducted by: [illegible]

Shaw
Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-19-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: SITE MAINTANENCE

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: DIESEL, GASOLINE

Physical Hazards: Slip, Trip, Fall, Pinch Points, Heat stress, Ticks, insects, snakes, mosquitos, Struck by/Against

Personal Protective Equipment:

Activity: _____ **PPE Level:** _____

Activity: _____ **PPE Level:** _____

Activity: _____ **PPE Level:** _____

Activity: _____ **PPE Level:** _____

New Equipment: _____

Other Safety Topic(s): _____

Attendees

NAME PRINTED	SIGNATURE
STEVE SMITH	Steve Smith
TIM GOLLINS	[illegible]
CARO HERNANDEZ	[illegible]
ED HOWLEY	[illegible]
JIM WRIGHT	[illegible]

Meeting Conducted by: Bill Smith

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-20-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: Check EIS, Excavate "C"

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: Gas / Fuel / Oil

Physical Hazards: Open Excavations, Slip, Trip, Falls
Moving Equipment

Personal Protective Equipment:

Activity: Excavate **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Ed Abeley	Ed Abeley
Steve Smith	Steve Smith
Cano Hernandez	[illegible]
Jim Collins	[illegible]

Meeting Conducted by: Bal Singh

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-21-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: OVER EXCAVATE AREA "C" LOAD DEBRIS

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: GAS / OIL / FUEL

Physical Hazards: TRAFFIC CONTROL, MOVING EQUIPMENT OPEN EXCAVATIONS, SLIP / TRIP / FALL

Personal Protective Equipment:

Activity: LOAD DEBRIS **PPE Level:** D

Activity: EXCAVATE **PPE Level:** D

Activity: TRAFFIC CONTROL **PPE Level:** D

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
STEVE SMITH	Steve Smith
Ed Abley	Ed Abley
Tim Collins	[illegible]
Jim WRIGHT	[illegible]
CARL HERNANDEZ	[illegible]
ADAM FORSHEY	Adam Forshey
Tom Hurley	[illegible]

Meeting Conducted by: Bill Simy

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-23-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: Check E+S Seed Site 42, Top Soil "B"

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: Slip / Trip / Fall, Lifting

Personal Protective Equipment:

Activity: E+S **PPE Level:** D

Activity: Seed **PPE Level:** D

Activity: Top Soil **PPE Level:** D

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Joe Hurley	[illegible]
Jim Collins	[illegible]
Steve Smith	Steve Smith
Jim Wright	[illegible]
Ed Apsey	[illegible]
Cano Hernandez	[illegible]
Adam Forshey	Adam Forshey

Meeting Conducted by: Bill Sy

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-27-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: LOAD out HAZ. Soil At Site 57

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: GAS / Oil / Fuel

Physical Hazards: MOVING Equipment, Slip, Trip, FALL RAIN

Personal Protective Equipment:

Activity: LOAD out **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s): LIGHTING

Attendees

NAME PRINTED	SIGNATURE
Tim Collins	[signature]
Ed Abney	[signature]
[illegible]	[signature]
STEVE Smith	Steve Smith
Chris Herrmann	[signature]
Jim WRIGHT	[signature]

Meeting Conducted by: [signature]

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 6-28-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: Soil Load out

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: Haz. Soil - T.C.E. Gas oil Fuel

Physical Hazards: Moving Equipment, Slip Trip Fall Lifting

Personal Protective Equipment:

Activity: Soil Load out **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Steve Smith	Steve Smith
Ed Abley	Ed Abley
Tim Collins	[illegible]
Tom Hurley	[illegible]
Jim Wright	[illegible]
Adam Forshey	Adam Forshey

Meeting Conducted by: [illegible]

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # ~~115273~~ 120359 **Date:** 6-29-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: LOAD SOIL / BACK FILL AREA "A"

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: T.C.E. GAS OIL FUEL

Physical Hazards: MOVING EQUIPMENT, OPEN EXCAVATIONS SLIP TRIP FALL

Personal Protective Equipment:

Activity: LOAD OUT **PPE Level:** D

Activity: BACKFILL **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Tim Collins	[illegible]
STEVE Smith	Steve Smith
Tom Hurley	[illegible]
Ed Abney	[illegible]
Jim Wright	[illegible]
ADAM FORSHEY	[illegible]

Meeting Conducted by: Bill Sum

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # ~~115273~~ 120359 **Date:** 6-30-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: BACK FILL

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: SLIP TRIP FALL, OPEN EXCAVATIONS MOVING EQUIPMENT

Personal Protective Equipment:

Activity: BACK FILL **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
STEVE Smith	Steve Smith
Tim Collins	
Tom Hurley	
ADAM FORSHEY	Adam Forshey

Meeting Conducted by: Bill Sny

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 1-01-04 **Time:** 0630

Client: FSSI / NAVY

Work Activities:

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards:

Personal Protective Equipment:

Activity: Stockpiling fill material **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Ed Abeley	
Tim Collins	
Cam Hearne	

Meeting Conducted by: Cam Hearne

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # ~~115273~~ 120359 **Date:** 7-5-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities:

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: T.C.E GAS OIL FUEL

Physical Hazards: TRUCKS MOVING IN REVERSE TRAFFIC CONTROL

Personal Protective Equipment:

Activity: BACKFILL AREA A & C **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Don Hurley	
Tim Collins	

Meeting Conducted by: [illegible] 147

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # ~~115273~~ 120359 **Date:** 7-6-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: RECEIVING TRUCKS FOR BACKFILL

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: TRAFFIC & PED CONTROL - TRUCKS MOVING IN REVERSE OVER HEAD UTILITIES WHEN TRUCKS DUMPING

Personal Protective Equipment:

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Ron Shriver	
Adam FORSHEY	Adam Forshey
[illegible]	
Steve Smith	Steve Smith
Tim Collins	

Meeting Conducted by: [illegible]

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7/7/06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: Remove Silt Fence - Site 42

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: None

Physical Hazards: Trip, Fall Heat stress

Personal Protective Equipment:

Activity: Remove E&S Controls **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Tim Collins	[signature]
STEVE Smith	Steve Smith
Ed Abney	[signature]
Tom Hurley	[signature]

Meeting Conducted by: [signature]

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7/8/06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: Backfill Area "C" Site 57

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: Trip Fall Struck by

Personal Protective Equipment:

Activity: Back Fill **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s): Traffic Control

Attendees

NAME PRINTED	SIGNATURE
Tim Collins	[illegible]
STEVE Smith	Steve Smith
Ed Abney	Ed Abney

Meeting Conducted by:

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Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7-10-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: GRADO AREA "A" · Site 57

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: GAS / OIL / Fuel

Physical Hazards: MOVING Equipment, Slip, Trip, Fall

Personal Protective Equipment:

Activity: GRADE **PPE Level:** "A"

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
STEVE Smith	Steve Smith
Ed Abney	Ed Abney
[illegible]	[illegible]
Jim Collins	[illegible]
Carlo Hernandez	[illegible]

Meeting Conducted by: Bill Sum

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Shaw Environmental & Infrastructure, Inc.

ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7-11-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: Site Restoration

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: Diesel

Physical Hazards:

Personal Protective Equipment:

Activity: **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Tim Collier	[illegible]
[illegible]	[illegible]
Ed Abney	[illegible]
Steve Smith	Steve Smith

Meeting Conducted by: [illegible]

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7/12/06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: GRADE + SEED AREA "A"

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: Slip, Trip, Falls, Moving Equipment

Personal Protective Equipment:

Activity: GRADE **PPE Level:** "D"

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Steve Smith	Steve Smith
Ed Abney	Ed Abney
Tom Hurley	[illegible]
Tim Collins	[illegible]
Cano Hernandez	[illegible]

Meeting Conducted by: [illegible]

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7-13-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: Check E+S, GRADE, DECON

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards:

Personal Protective Equipment:

Activity: GRADE **PPE Level:** D

Activity: DECON **PPE Level:** D

Activity: E+S **PPE Level:** D

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Tim Collins	[illegible]
STEVE Smith	Steve Smith
CARL HERNANDEZ	[illegible]
Ed Abley	[illegible]
[illegible]	[illegible]

Meeting Conducted by: [illegible]

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7-14-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: Move Gazebo / Grade / Clean Area

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: Slip / Trip / Fall, Lifting, moving Equipment

Personal Protective Equipment:

Activity: Clean **PPE Level:** D

Activity: Gazebo **PPE Level:** D

Activity: Grade **PPE Level:** D

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Steve Smith	Steve Smith
Tom Collins	[illegible]
Ed Ashley	[illegible]
Tom [illegible]	[illegible]
Carlo Hernandez	[illegible]

Meeting Conducted by: Bul Say

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7-17-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities:

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: Hi Heat, Slip, Trip, Fall, Struck by/against, Pinch Points, Traffic, Spiders, Snakes, Insects

Personal Protective Equipment:

Activity: Site Restoration **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Ed Hawley	[signature]
Steve Smith	Steve Smith
Tim Collins	[signature]

Meeting Conducted by: [signature]

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7-18-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities:

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: Hi Heat Index — Slip, Trip, Fall, Pinch Points, Struck by/Against, Moving equipment, TRAFFIC, Insects, Spiders

Personal Protective Equipment:

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Ed Hanley	[signature]
STEVE Smith	Steve Smith
Tim Collins	[signature]
Cano Hernandez	[signature]

Meeting Conducted by: [signature]

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7-19-06 **Time:** ~~0630~~ 0700

Client: FSSI / NAVY

Work Activities: Pave Site 57 / Repair patch Site 42

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: Moving Equipment, Slip, Trip, Fall
New Contractor on site

Personal Protective Equipment:

Activity: Support Paving **PPE Level:** D

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s): Heat - watch for signs of heat stress - Force water etc.

Attendees

NAME PRINTED	SIGNATURE
Ed Abney	Ed Abney
Steve Smith	Steve Smith
Tim Collins	[illegible]
Carlos Hernandez	[illegible]
Robert Bladen	[illegible]
Tyrone Murray	Tyrone Murray
Joseph Jones	Joseph Jones
Edward DeFelice	Edward DeFelice
John Workman	John Workman
Robert Bladen Jr	Robert Bladen

Meeting Conducted by: [illegible]

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7-20-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: CLEAN PARKING LOT, ROAD & CONTINUING IN CONEX BOX

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards: None

Physical Hazards: High Heat INDEX, BACK SPRAY, Noise, TRAFFIC,

Personal Protective Equipment:

Activity: Site Restoration **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Tim Gillus	[illegible]
Ed Horsey	[illegible]

Meeting Conducted by: [illegible]

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7-21-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: Clean Parking Lot, Clean & Fuel equipment

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards: High Heat Index, Dehydration, Insects, Poison Ivy, Flying objects, Dust

Personal Protective Equipment:

Activity: All Listed **PPE Level:** "D" Modified

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Ed Abney	Ed Abney

Meeting Conducted by: [illegible]

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ATTACHMENT 2
TAILGATE SAFETY MEETING FORM

Project Name/Number: Indian Head, MD / # 115273 **Date:** 7-22-06 **Time:** 0630

Client: FSSI / NAVY

Work Activities: Clean Parking Lot & street / Decon equip

Hospital Name & Address: Civista / 701 E. St. Charles St / LaPlata, MD

Hospital Phone No.: 301-609-4000 **Ambulance Phone No.:** 301-744-4333

Safety Topics Presented

Chemical Hazards:

Physical Hazards:

Personal Protective Equipment:

Activity: All Listed **PPE Level:** "D" Modified

Activity: **PPE Level:**

Activity: **PPE Level:**

Activity: **PPE Level:**

New Equipment:

Other Safety Topic(s):

Attendees

NAME PRINTED	SIGNATURE
Ed Abney	Ed Abney

Meeting Conducted by:

SECTION 5.0
SAFETY WORK PERMIT FOR EXPLOSIVE AREA

DATE: 5/31/06
BLDG/AREA 160

POST PERMIT ON WORKSITE
SAFETY WORK PERMIT FOR EXPLOSIVE AREA
INDIAN HEAD DIVISION, NAVAL SURFACE WARFARE CENTER

EXPIRES: 9/31/06

WORK PERFORMED BY: ACTIVITY FORCES-CODE ( )/ CONTRACTOR-NAME: Tetra Tech Support INC. ADHERE TO SPECS OF CONTRACT # 03-D-4402

YES ☐ NO ☑ RE-INSPECTION OF AREA BY SAFETY INSPECTOR REQUIRED PRIOR TO BEGINNING WORK CODE/INITIAL/DATE

DESCRIPTION OF WORK AUTHORIZED: Authorized to remove contaminated soil (Tetra chloro Ethelene) T.C.E. and the replace it with clean soil as per contract specifications and agreements. (Site 57)

1. DECONTAMINATION OF AREA REQUIRED AS FOLLOWS:

YES	NO	PRIOR TO START CLEAR WORK THROUGH BLDG/AREA SUPERVISOR DAILY
☐	☑	A. REMOVE ALL EXPLOSIVES FROM (SPECIFY)
☑	☐	B. REMOVE HAZARDOUS MATERIALS (SPECIFY) Done
☐	☑	C. WASH AREA DOWN (SPECIFY)
☐	☑	D. TREAT WITH DESENSITIZING AGENT (SPECIFY)
☑	☐	E. SECURE EXPLOSIVE OPERATIONS IN Bldg. 292 if
☐	☐	F. OTHER (SPECIFY) Contract effort will be within explosive arcs.

2. OPEN FLAME (HOT) OR SPARK-PRODUCING WORK (WELDING, TORCH, SOLDERING, GRINDING, ETC.) AUTHORIZED ____ NOT AUTHORIZED ____

YES	NO	
☐	☑	A. HAVE FIRE EXTING. ON-SITE DURING HOT WORK (TYPE:)
☐	☑	B. HAVE FIRE WATCH ON-SITE DURING HOT WORK
☐	☑	C. STAY ON-SITE 30 MINUTES AFTER HOT WORK IS COMPLETE
☐	☑	D. REMOVE FLAMM./COMBUST. MATERIAL FROM HOT-WORK SITE
☐	☑	E. BUFFER BAY(S) REQUIRED (SPECIFY)
☐	☑	F. HOT WORK AREA TO REMAIN WET DURING WORK
☐	☑	G. OTHER (SPECIFY)

3. EQUIPMENT AUTHORIZED FOR USE

YES	NO	
☐	☑	A. TORCH/WELDER
☑	☐	B. POWER TOOLS (GRINDER, DRILL, SKILSAW, BACKHOE, GENERATOR, AIR COMPRESSOR)/POWER EQUIPMENT (SPECIFY) Excavator Front End Loader
☑	☐	C. HAND TOOLS
☐	☑	D. NON-SPARKING TOOLS
☐	☑	E. OTHER (SPECIFY)

4. PERSONAL PROTECTIVE EQUIPMENT REQUIRED

YES	NO	
☐	☐	EYE PROTECTION (SAFETY GLASSES, GOGGLES, FACE SHIELD)
☐	☐	HEARING PROTECTION
☐	☐	POWDER UNIFORM (COVERALLS & CAP)
☐	☐	CONDUCTIVE SHOES OR NO-STATS
☐	☐	RESPIRATORY PROTECTION (SPECIFY)
☐	☐	HAND/FOOT/HEAD PROTECTION (SPECIFY)
☐	☐	FALL PROTECTION REQUIRED (SPECIFY)
☐	☐	OTHER (SPECIFY)

Per Safety Plan

5. ADDITIONAL REQUIREMENTS

YES	NO	
☑	☐	NOTIFY BLDG/AREA SUPERVISOR WHEN WORK IS COMPLETE
☐	☑	EXPLOSIVES TRANSFERS ALLOWED IN AREA DURING WORK
☑	☐	NOTIFY FIRE DEPT / PUBLIC WORKS UTILITIES OF WORK
☑	☐	LOCKOUT/TAGOUT HAZARDOUS ENERGY SOURCES (SPECIFY)
☐	☑	RE-INSP OF AREA REQ'D BY SAFETY INSP UPON COMPLETION OF WORK
☐	☑	OTHER (SPECIFY)

6. OTHER: Provision of EM-385-1-1 Army Corp of Engineer must be strictly adhered to. Relocation of smoking gazebo # TS-17 is authorized and the gazebo will be put back at its original location

SUPERVISOR IN IMMEDIATE AREA/DATE	SAFETY DEPARTMENT OFFICIAL/DATE	CONTRACT REPRESENTATIVE/DATE	PUBLIC WORKS REPRESENTATIVE/DATE
Deborah C Clark	R Pruiel 5/31/06	[illegible] 5/31/06	

NDW-IHDIVNAVSURFWARCEN-5100/3 (Rev. 8-98)

This permit is issued for the protection of all workers and equipment. No deviation from requirements of this permit is authorized without permission of the issuing agent. If method of work, or conditions of immediate area change, or other hazardous conditions arise during work, work will be stopped immediately and the Safety Department and/or the Fire Department will be notified. Notify the Safety Department when job is completed. All permits issued are good ONLY for the day issued and new permits will be issued daily if work is to continue over a period of time unless otherwise stated.

DO ALL WORK THE SAFE WAY

SECTION 6.0
SIGNED CLASS IR WORK APPROVAL PERMIT & RECORD OF CATEX

Class IR Work Approval Permit & Record of CATEX

Naval Support Facility - Indian Head

Section A. - Customer Supplied Information (by applicant) Tracking Number: 06-187

Name of Applicant: Shawn A. Jorgensen Date of Application: 4/4/2006 Phone ext.: 2263

Project Name: IR Site 57 Removal Action IR Site Number: Area around 292 and 160

Short Project Description: Remove approximately 606 cubic yards of contaminated soil from 3 locations (Areas A, B, and C) n Buildings 292 and 160. Soil will be removed from a combined surface area of 2045 square feet and d of 8 feet (or to the shallow water table). The excavations will be backfilled with clean soil. Additiona tasks include: relocate utilities; construct a decon pad and material storage pad; install silt fence, stabilized construction entrance, and straw bales per the erosion and sediment control plan; and samp transport, and dispose of contaminated soil off-site. The smoking gazebo, ~~will be relocated to a locat approved by NSWC Explosive Safety~~ closed while work takes place. Nuse equipment and trailer will be moved to the southern portion of the asphalt area. SAJ 5/30/06 SA

Location Description: The three areas to be excavated are shown in Figure 3-1 of the Work Plan, Removal Action for Site 57 - Building 292 TCE Contamination prepared by Field Support Services, Inc., and Shaw Environmental, Inc., under NAVFACWASH Contract No. N62470-03-D-4402, TO# 025.

Work Request/Service Ticket Number: _____

Dates of Work: Start: 5/1/2006 Completion: 6/16/2006

Expiration Date: 180 Days from Start Date

Section B. - Identified Work Restriction Areas

☐ ESQD Arcs (K=18, K=24)	☑ Natural Resources/Earth Disturb. — Utility Location Required
☐ Survey Control/Property Points	☐ Archeological Area
☑ Installation Restoration (IR) Site	☑ Buried Utilities
☑ Worker Notification Area	☐ Other Work Restriction Area
☐ Surface Water/ Wetlands Buffer	☐ No Work Restriction Areas
☐ Eagle Nest Buffer	

Conditions for Approval (Resource Manager Consulted)

BuriedUtilities Conditions
Utility Location Required

Other Work Restriction Areas: May Require Consultation

WorkerNotificationArea Conditions
Work is near Railroad tracks. Area around railroad tracks may have been historically treated with arsenic-containing herbicide. Contact John Stacy (x2153) for contaminant information if necessary

NaturalResourcesEarthDisturbance Conditions
Erosion control matting should be used when the slopes are 3:1 or greater. Implement sediment and erosion controls if disturbed soil is exposed for more than two days. Any disturbed grassy areas must be smoothed, seeded, and covered with straw.

~~Smoking gazebo will be closed while work takes place~~ SA 5/30/06 remove SAJ

Site Restrictions Verification (by NEPA Program Manager or Authorized Personnel)

Signature of Verifying Official Shawn A. Jorgensen Date 5/2/2006

Section C. – Permit Receipt (by applicant)

I have read and understood the conditions for approval listed in Section B. All work will be performed in accordance with these conditions:

Applicant: _____ Date: _____

Note: This permit is not valid without the signature of the NEPA Program Manager and Applicant.
Signed permit must be on-site while all work is being performed.

NDW-IH Work Approval Permit Layout

50 0 50 100 150 200 250 Feet

Signature: Shawn A. Jorgensen

Permit NOT Valid Without Signature

Work Area
Buildings
Trailers
Cargo Boxes
Sidewalk
Roads
Asphalt
Dirt
Gravel
Parking Lots
Asphalt
Concrete
Gravel

IR Sites
Eagle Protection Areas
Species Protection Areas
Cultural Resources Protection
Historic Bldgs
Worker Notification Areas
Explosive ranges areas
Intraline (K18) Work Restrictions
Wetlands
Surface Water Bodies
Recreation Areas

Surface Water Streams
Dry
Intermittent
Permanent
Tidal
Survey Control Points
Fences

Utilities
Industrial
Steam
Potable Water Lines
Potable Valve
River Water Lines
Fire Hydrants
IH Stormwater
IH Sanitary Sewer
Primary Electric

Utility Poles
Abandoned
Light
Pole
Support
Light Pole
Transformer Poles
Telephone
Aboveground
Submarine Cable
"Creek Bottom"
Underground
Underground TV

N W E S

DISCLAIMER: Utilities depicted are believed to be accurate to +/- 15 feet. See disclaimer within the Dig Permit Policy.

NOTE: While performing work, if any underground utilities or item(s) are detected and are not shown on this plan, please detail at approximate location and give description of item(s) on attached data sheet. Please return copy of both sheets to IRT Coordinator.

APPENDIX E

QUALITY CONTROL DOCUMENTATION
INTERIM REMOVAL ACTION AT
SITE 57-BUILDING 292 TCE CONTAMINATION
NAVAL SUPPORT FACILITY INDIAN HEAD
INDIAN HEAD, MARYLAND
CONTRACT NO. N62470-03-D-4402
TASK ORDER NO. 025

Prepared for:
Naval Facilities Engineering Command Washington
1314 Harwood Street, S.E.
Washington Navy Yard, DC 20374-5018

Prepared by:

Field Support Services, Inc.
6303 Ivy Lane, Suite 800
Greenbelt, Maryland 20770

and

Shaw Environmental, Inc.
500 E. Main Street, Suite 1630
Norfolk, Virginia 23510

September 2006
Project No. 120359

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SECTION 1.0
ENVIRONMENTAL CONDITIONS REPORT

Area A

Area A Bollards, East Corner of Building 292

Area A Roll-Off Obstruction

Area A South and Drop Inlet

Area A West

Area A Monitoring Wells

Gazebo Near Area A

Area B

Area B Locate Markings

Area B Southwest of Structure

Drums on South Lot of Area B

Items Along East Side of Lot

Pipe Rack Cuts

Pipe Rack on South Lot of Area B

Area C Monitoring Wells

Area C Debris

Area C Water Marks and PIV

Trailer and Wire Mesh Debris

Trailer Structure

SECTION 2.0
SUBMITTAL REGISTER/SUBMITTALS

SUBMITTAL REGISTER

Task Order No. 025 Contract No. N62470-03-D-4402	Project No. 120359 Project Title: Site 57	Revision No. 01 FSSI/Shaw

Spec. Sect.	SD Number and Submittal Description	Spec Paragraph Number/ Work Plan Reference	Approving Authority	Other Reviewers	Transmittal Control No.	Planned Submittal Date	Contractor Action			Approving Authority				Date Rcvd from Appr Auth	Remarks
							Action Code	Date of Action	Date Forwarded to Appr Auth/ from Contr	Date Forward to Other Reviewer	Date Rcvd from Other Reviewer	Acti on Cod e	Date of Action		
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)	(p)
	Preconstruction Submittals														
	Work Plan		G			Prior to Start	A		May 18, 2006			A		May 22, 2006	
	Project Schedule	Appendix A	G			Prior to Start	A		May 18, 2006			A		May 22, 2006	
	Erosion and Sediment Control Plan	Appendix B	G			Prior to Start	A		May 18, 2006			A		May 22, 2006	
	Site Specific Health and Safety Plan	Appendix C	G			Prior to Start	A		May 18, 2006			A		May 22, 2006	
	Quality Control Plan	Appendix D	G			Prior to Start	A		May 18, 2006			A		May 22, 2006	
	Field Sampling and Analysis Plan	Appendix E	G			Prior to Start	A		May 18, 2006			A		May 22, 2006	
	During Construction Submittals														
	Waste Characterization Analysis	3.5	G		003	June 23, 2006	A		June 23, 2006			A		June 27, 2006	Approved via email
	Backfill Chemical Analysis	3.5	G		001	June 6, 2006	A		June 8, 2006			A		June 14, 2006	Approved via email
	Topsoil Chemical Analysis	3.5	G		002	June 21, 2006	A		June 21, 2006			A		June 23, 2006	Approved via email
	Facility Permit	3.7			004	June 28, 2006	A		June 28, 2006						
	Shipping Waste Manifests	3.7			005	July 24, 2006	A		July 28, 2006						
	Backfill Geotechnical Analysis (if determined necessary by the Navy)	3.8.1			001	June 6, 2006	A		June 8, 2006			A		June 14, 2006	Approved via email
	Backfill Density Testing (if determined necessary by the Navy)	3.8.1			007	Closeout Report	A		August 1, 2006						

SUBMITTAL REGISTER

Task Order No. 025 Contract No. N62470-03-D-4402	Project No. 120359 Project Title: Site 57	Revision No. 01 FSSI/Shaw

Spec. Sect.	SD Number and Submittal Description	Spec Paragraph Number/ Work Plan Reference	Approving Authority	Other Reviewers	Transmittal Control No.	Planned Submittal Date	Contractor Action			Approving Authority				Date Rcvd from Appr Auth	Remarks
							Action Code	Date of Action	Date Forwarded to Appr Auth/ from Contr	Date Forward to Other Reviewer	Date Rcvd from Other Reviewer	Action Code	Date of Action		
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)	(p)
	Seeding, Fertilizing and Mulching	3.8.3					AN								Visually approved by QC Manager
	Coarse Run Aggregate CR-6 Geotechnical Analysis (if determined necessary by the Navy)	3.8.4													Not required per NAVFAC WASH
	CR-6 Density Testing (if determined necessary by the Navy)	3.8.4													Not required per NAVFAC WASH
	Bituminous Concrete Binder (Base) Course	3.8.4			006	July 24, 2006	A		July 28, 2006						
	Bituminous Concrete Wearing (Surface) Course	3.8.4			006	July 24, 2006	A		July 28, 2006						
	Post-Construction Submittals														
	Closeout Report	3.12	G		Closeout Report	October 2006									
	Environmental Conditions Report	3.2.1	G		Closeout Report	October 2006									
	Original Waste Manifests	3.7			Closeout Report	October 2006									
	As-Built Records	3.9	G		Closeout Report	October 2006									
	Contractor Production Reports	3.10			Closeout Report	October 2006									
	QC Reports	3.10			Closeout Report	October 2006									
	QC Meeting Minutes	Appendix D			Closeout	October									

SUBMITTAL REGISTER

Task Order No. 025 Contract No. N62470-03-D-4402	Project No. 120359 Project Title: Site 57	Revision No. 01 FSSI/Shaw

							Contractor Action			Approving Authority					
Spec. Sect.	SD Number and Submittal Description	Spec Paragraph Number/ Work Plan Reference	Approving Authority	Other Reviewers	Transmittal Control No.	Planned Submittal Date	Action Code	Date of Action	Date Forwarded to Appr Auth/ from Contr	Date Forward to Other Reviewer	Date Rcvd from Other Reviewer	Acti on Cod e	Date of Action	Date Rcvd from Appr Auth	Remarks
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)	(p)
					Report	2006									

Notes:

Approved By:

G: Government

Blank: QC Manager

Reference; QMP-16.2 Submittal Management Process

ACTION CODES

A: Approved

AN: Approved as Noted

NR: Not Reviewed

RR: Disapproved; Revise and Resubmit

SUBMITTAL PACKAGE TRANSMITTAL FORM

(CONTRACTING OFFICER APPROVAL)

SUBMITTAL PACKAGE TRANSMITTAL FORM - LANTDIV CONTRACT NO. N62470-03-D-4402 (For Transmitting Product Data, Shop Drawings, Material Samples and Administrative Data)	Date 6/6/2006	Transmittal No. 001

SECTION 1 - REQUEST FOR CONTRACT OFFICER APPROVAL

To:	From:	Project Title: Interim Removal Action at Site 57 - Building 292 TCE Remova	Check One
Navy	FSSI/Shaw	Location: Indian Head, Maryland Task Order No.: 025	☑ Initial Submittal ☐ Re-submittal
Project/Job No.: 115273		Specification Section:	SD Number:

Item No.	Description of Item(s) Submitted	Contract Reference Document		No. of Copies	FOR CO REVIEW ONLY	
		Spec Para No.	Dwg. Sht. No.		ACTION CODE	DATE
001-01	Select Fill from Stinnetts - Site 57 Chemical Analysis Results (Sample ID 115273-SF-013)	3.5	NA	1		
001-02	Select Fill from Stinnetts - Site 57 Geotechnical Analysis including Geotextile Clogging Calculation	3.5	NA	1		
001-03	Select Fill from Stinnetts - Site 57 Confirmation of Soils Letter from Ed Stinnett	3.5	NA	1		

Action Code Comments/Explanation

A - Approved
AN - Approved as Noted
NR - Not Reviewed
RR - Revise & Resubmit
D - Disapproved

(Use Continuation Sheet, if necessary)

Certification Statement: I hearby certify that the equipment, material, or article shown and marked in this submittal is proposed to be incorporated into Contract Number N62470-02-D-4402, is in compliance with the contract drawings and specificaions, can be installed in the allocated spaces, and is submitted for Government approval.

Certified by Submittal Reviewer [signature] Date 6/7/06

Certified by QC Manager Adam Forshey Date 06/08/06

SECTION II - APPROVAL ACTION (Please provide action code(s) in above review block)

Distribution:
Cathy Gardner (ROICC - IH)
Jim Desmond (ROICC - IH)
Shawn Jorgensen (NSF - IH)
Jeff Morris (NAVFAC WASH)

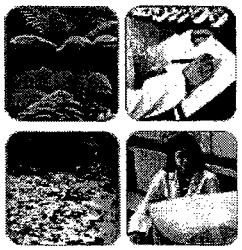
Approving Authority:

Signature	Title	Date
[signature]	Project Mang	6/20/06

Southeast ACCUTEST Laboratories

IT'S ALL IN THE CHEMISTRY

03/02/06



Technical Report for

Shaw E & I, Inc.

Indian Head

115273

Accutest Job Number: F38750

Sampling Date: 02/21/06

Report to:

Shaw E & I, Inc.

natasha.sullivan@shawgrp.com

ATTN: Natasha Sullivan

Total number of pages in report: 94

ACCREDITED IN ACCORDANCE WITH nelac

Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

Harry Behzadi, Ph.D.
Laboratory Director

1956 - 2006
50
YEARS OF EXCELLENCE
Accutest Laboratories

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK

This report shall not be reproduced, except in its entirety, without the written approval of Accutest Laboratories.

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Sample Summary

Shaw E & I, Inc.

Job No: F38750

Indian Head
Project No: 115273

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F38750-1	02/21/06	16:00 BH	02/22/06	SO	Soil	115273-SF-013
F38750-1A	02/21/06	16:00 BH	02/22/06	SO	Soil	115273-SF-013

Soil samples reported on a dry weight basis unless otherwise indicated on result page.

Sample Results

Report of Analysis

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8260B	Percent Solids:	89.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	K025582.D	1	02/25/06	NAF	n/a	n/a	VK1144
Run #2							

	Initial Weight
Run #1	4.40 g
Run #2	

VOA TCL List

CAS No.	Compound	Result	RL	MDL	Units	Q
67-64-1	Acetone	ND	63	32	ug/kg	
71-43-2	Benzene	ND	6.3	2.5	ug/kg	
75-27-4	Bromodichloromethane	ND	6.3	2.5	ug/kg	
75-25-2	Bromoform	ND	6.3	2.5	ug/kg	
108-90-7	Chlorobenzene	ND	6.3	2.5	ug/kg	
75-00-3	Chloroethane	ND	6.3	2.5	ug/kg	
67-66-3	Chloroform	ND	6.3	2.5	ug/kg	
75-15-0	Carbon disulfide	ND	6.3	2.5	ug/kg	
56-23-5	Carbon tetrachloride	ND	6.3	2.5	ug/kg	
75-34-3	1,1-Dichloroethane	ND	6.3	2.5	ug/kg	
75-35-4	1,1-Dichloroethylene	ND	6.3	2.5	ug/kg	
107-06-2	1,2-Dichloroethane	ND	6.3	2.5	ug/kg	
78-87-5	1,2-Dichloropropane	ND	6.3	2.5	ug/kg	
124-48-1	Dibromochloromethane	ND	6.3	2.5	ug/kg	
156-59-2	cis-1,2-Dichloroethylene	ND	6.3	2.5	ug/kg	
10061-01-5	cis-1,3-Dichloropropene	ND	6.3	2.5	ug/kg	
156-60-5	trans-1,2-Dichloroethylene	ND	6.3	2.5	ug/kg	
10061-02-6	trans-1,3-Dichloropropene	ND	6.3	2.5	ug/kg	
100-41-4	Ethylbenzene	ND	6.3	2.5	ug/kg	
591-78-6	2-Hexanone	ND	32	13	ug/kg	
108-10-1	4-Methyl-2-pentanone	ND	32	13	ug/kg	
74-83-9	Methyl bromide	ND	6.3	2.5	ug/kg	
74-87-3	Methyl chloride	ND	6.3	2.5	ug/kg	
75-09-2	Methylene chloride [b]	7.4	13	6.3	ug/kg	J
78-93-3	Methyl ethyl ketone	ND	32	13	ug/kg	
100-42-5	Styrene	ND	6.3	2.5	ug/kg	
71-55-6	1,1,1-Trichloroethane	ND	6.3	2.5	ug/kg	
79-34-5	1,1,2,2-Tetrachloroethane	ND	6.3	2.5	ug/kg	
79-00-5	1,1,2-Trichloroethane	ND	6.3	2.5	ug/kg	
127-18-4	Tetrachloroethylene	ND	6.3	2.5	ug/kg	
108-88-3	Toluene	ND	6.3	2.5	ug/kg	
79-01-6	Trichloroethylene	ND	6.3	2.5	ug/kg	

ND = Not detected MDL - Method Detection Limit
RL = Reporting Limit
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8260B	Percent Solids:	89.8
Project:	Indian Head		

VOA TCL List

CAS No.	Compound	Result	RL	MDL	Units	Q
75-01-4	Vinyl chloride	ND	6.3	2.5	ug/kg	
1330-20-7	Xylene (total)	ND	19	5.7	ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	99%		78-123%
2037-26-5	Toluene-D8	101%		71-137%
460-00-4	4-Bromofluorobenzene	103%		61-157%
17060-07-0	1,2-Dichloroethane-D4	108%		74-125%

(a) Sample was received in a bulk container and preserved within 48 hours of sampling.
(b) Suspected laboratory contaminant.

ND = Not detected MDL - Method Detection Limit
RL = Reporting Limit
E = Indicates value exceeds calibration range

J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8270C SW846 3550B	Percent Solids:	89.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	A14888.D	1	02/27/06	ATX	02/27/06	T:OP5559	T:EA1064
Run #2							

	Initial Weight	Final Volume
Run #1	30.4 g	1.0 ml
Run #2		

ABN TCL List

CAS No.	Compound	Result	RL	MDL	Units	Q
65-85-0	Benzoic acid	ND	920	300	ug/kg	
95-57-8	2-Chlorophenol	ND	180	55	ug/kg	
59-50-7	4-Chloro-3-methyl phenol	ND	180	77	ug/kg	
120-83-2	2,4-Dichlorophenol	ND	180	57	ug/kg	
105-67-9	2,4-Dimethylphenol	ND	180	98	ug/kg	
51-28-5	2,4-Dinitrophenol	ND	920	100	ug/kg	
534-52-1	4,6-Dinitro-o-cresol	ND	370	120	ug/kg	
95-48-7	2-Methylphenol	ND	180	83	ug/kg	
	3&4-Methylphenol	ND	180	110	ug/kg	
88-75-5	2-Nitrophenol	ND	180	75	ug/kg	
100-02-7	4-Nitrophenol	ND	180	130	ug/kg	
87-86-5	Pentachlorophenol	ND	920	110	ug/kg	
108-95-2	Phenol	ND	180	80	ug/kg	
95-95-4	2,4,5-Trichlorophenol	ND	180	60	ug/kg	
88-06-2	2,4,6-Trichlorophenol	ND	180	63	ug/kg	
83-32-9	Acenaphthene	ND	180	56	ug/kg	
208-96-8	Acenaphthylene	ND	180	66	ug/kg	
120-12-7	Anthracene	ND	180	90	ug/kg	
56-55-3	Benzo(a)anthracene	ND	180	69	ug/kg	
50-32-8	Benzo(a)pyrene	ND	180	51	ug/kg	
205-99-2	Benzo(b)fluoranthene	ND	180	61	ug/kg	
191-24-2	Benzo(g,h,i)perylene	ND	180	85	ug/kg	
207-08-9	Benzo(k)fluoranthene	ND	180	83	ug/kg	
101-55-3	4-Bromophenyl phenyl ether	ND	180	68	ug/kg	
85-68-7	Butyl benzyl phthalate	ND	180	76	ug/kg	
100-51-6	Benzyl Alcohol	ND	180	63	ug/kg	
91-58-7	2-Chloronaphthalene	ND	180	66	ug/kg	
106-47-8	4-Chloroaniline	ND	180	59	ug/kg	
86-74-8	Carbazole	ND	180	160	ug/kg	
218-01-9	Chrysene	ND	180	72	ug/kg	
111-91-1	bis(2-Chloroethoxy)methane	ND	180	54	ug/kg	
111-44-4	bis(2-Chloroethyl)ether	ND	180	74	ug/kg	

ND = Not detected MDL - Method Detection Limit J = Indicates an estimated value
RL = Reporting Limit B = Indicates analyte found in associated method blank
E = Indicates value exceeds calibration range N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8270C SW846 3550B	Percent Solids:	89.8
Project:	Indian Head		

ABN TCL List

CAS No.	Compound	Result	RL	MDL	Units	Q
108-60-1	bis(2-Chloroisopropyl)ether	ND	180	69	ug/kg	
7005-72-3	4-Chlorophenyl phenyl ether	ND	180	41	ug/kg	
95-50-1	1,2-Dichlorobenzene	ND	180	54	ug/kg	
541-73-1	1,3-Dichlorobenzene	ND	180	76	ug/kg	
106-46-7	1,4-Dichlorobenzene	ND	180	71	ug/kg	
121-14-2	2,4-Dinitrotoluene	ND	180	59	ug/kg	
606-20-2	2,6-Dinitrotoluene	ND	180	78	ug/kg	
91-94-1	3,3'-Dichlorobenzidine	ND	370	140	ug/kg	
53-70-3	Dibenzo(a,h)anthracene	ND	180	77	ug/kg	
132-64-9	Dibenzofuran	ND	180	81	ug/kg	
84-74-2	Di-n-butyl phthalate	ND	180	64	ug/kg	
117-84-0	Di-n-octyl phthalate	ND	180	75	ug/kg	
84-66-2	Diethyl phthalate	ND	180	79	ug/kg	
131-11-3	Dimethyl phthalate	ND	180	61	ug/kg	
117-81-7	bis(2-Ethylhexyl)phthalate	ND	180	73	ug/kg	
206-44-0	Fluoranthene	ND	180	57	ug/kg	
86-73-7	Fluorene	ND	180	48	ug/kg	
118-74-1	Hexachlorobenzene	ND	180	81	ug/kg	
87-68-3	Hexachlorobutadiene	ND	180	67	ug/kg	
77-47-4	Hexachlorocyclopentadiene	ND	180	32	ug/kg	
67-72-1	Hexachloroethane	ND	180	80	ug/kg	
193-39-5	Indeno(1,2,3-cd)pyrene	ND	180	100	ug/kg	
78-59-1	Isophorone	ND	180	63	ug/kg	
91-57-6	2-Methylnaphthalene	ND	180	64	ug/kg	
88-74-4	2-Nitroaniline	ND	180	68	ug/kg	
99-09-2	3-Nitroaniline	ND	180	64	ug/kg	
100-01-6	4-Nitroaniline	ND	180	180	ug/kg	
91-20-3	Naphthalene	ND	180	95	ug/kg	
98-95-3	Nitrobenzene	ND	180	73	ug/kg	
621-64-7	N-Nitroso-di-n-propylamine	ND	180	69	ug/kg	
86-30-6	N-Nitrosodiphenylamine	ND	180	77	ug/kg	
85-01-8	Phenanthrene	ND	180	65	ug/kg	
129-00-0	Pyrene	ND	180	72	ug/kg	
120-82-1	1,2,4-Trichlorobenzene	ND	180	59	ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	46%		26-124%
4165-62-2	Phenol-d5	46%		28-119%
118-79-6	2,4,6-Tribromophenol	42%		26-134%

ND = Not detected MDL - Method Detection Limit
RL = Reporting Limit
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8270C SW846 3550B	Percent Solids:	89.8
Project:	Indian Head		

ABN TCL List

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
4165-60-0	Nitrobenzene-d5	41%		27-117%
321-60-8	2-Fluorobiphenyl	51%		24-113%
1718-51-0	Terphenyl-d14	59%		37-147%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected MDL - Method Detection Limit
RL = Reporting Limit
E = Indicates value exceeds calibration range

J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8015	Percent Solids:	89.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	HH019914.D	1	03/01/06	AB	02/22/06 16:13	n/a	GHH941
Run #2							

	Initial Weight	Final Volume	Methanol Aliquot
Run #1	4.39 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	6.9	3.5	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	88%		62-135%
98-08-8	aaa-Trifluorotoluene	90%		65-118%

(a) Sample was received in a bulk container and preserved within 48 hours of sampling.

ND = Not detected MDL - Method Detection Limit
RL = Reporting Limit
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8081A SW846 3550B	Percent Solids:	89.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	GG26146.D	1	02/28/06	ATX	02/28/06	T:OP5563	T:GGG825
Run #2							

	Initial Weight	Final Volume
Run #1	30.8 g	10.0 ml
Run #2		

Pesticide TCL List

CAS No.	Compound	Result	RL	MDL	Units	Q
309-00-2	Aldrin	ND	1.8	0.43	ug/kg	
319-84-6	alpha-BHC	ND	1.8	0.40	ug/kg	
319-85-7	beta-BHC	ND	1.8	0.58	ug/kg	
319-86-8	delta-BHC	ND	1.8	0.58	ug/kg	
58-89-9	gamma-BHC (Lindane)	ND	1.8	0.80	ug/kg	
5103-71-9	alpha-Chlordane	ND	1.8	0.36	ug/kg	
5103-74-2	gamma-Chlordane	ND	1.8	0.36	ug/kg	
60-57-1	Dieldrin	ND	3.6	0.98	ug/kg	
72-54-8	4,4'-DDD	ND	3.6	1.1	ug/kg	
72-55-9	4,4'-DDE	ND	3.6	1.4	ug/kg	
50-29-3	4,4'-DDT	ND	3.6	1.6	ug/kg	
72-20-8	Endrin	ND	3.6	1.2	ug/kg	
1031-07-8	Endosulfan sulfate	ND	3.6	1.1	ug/kg	
7421-93-4	Endrin aldehyde	ND	3.6	1.5	ug/kg	
53494-70-5	Endrin ketone	ND	3.6	0.98	ug/kg	
959-98-8	Endosulfan-I	ND	3.6	0.51	ug/kg	
33213-65-9	Endosulfan-II	ND	3.6	0.91	ug/kg	
76-44-8	Heptachlor	ND	1.8	0.51	ug/kg	
1024-57-3	Heptachlor epoxide	ND	1.8	0.36	ug/kg	
72-43-5	Methoxychlor	ND	18	7.9	ug/kg	
8001-35-2	Toxaphene	ND	18	14	ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	88%		36-134%
2051-24-3	Decachlorobiphenyl	105%		33-145%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected MDL - Method Detection Limit
RL = Reporting Limit
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8082 SW846 3550B	Percent Solids:	89.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	DD54869.D	1	03/02/06	ATX	02/27/06	T:OP5555	T:GDD988
Run #2							

	Initial Weight	Final Volume
Run #1	30.2 g	10.0 ml
Run #2		

PCB List

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	18	2.2	ug/kg	
11104-28-2	Aroclor 1221	ND	18	10	ug/kg	
11141-16-5	Aroclor 1232	ND	18	5.2	ug/kg	
53469-21-9	Aroclor 1242	ND	18	4.8	ug/kg	
12672-29-6	Aroclor 1248	ND	18	2.2	ug/kg	
11097-69-1	Aroclor 1254	ND	18	2.6	ug/kg	
11096-82-5	Aroclor 1260	ND	18	2.6	ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	66%		27-143%
2051-24-3	Decachlorobiphenyl	60%		19-143%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected MDL - Method Detection Limit
RL = Reporting Limit
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8015 M SW846 3550B	Percent Solids:	89.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	CC11467.D	1	02/28/06	ATX	02/28/06	T:OP5562	T:GCC533
Run #2							

	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	9.2	3.7	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	73%		41-153%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected MDL - Method Detection Limit
RL = Reporting Limit
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
		Percent Solids:	89.8
Project:	Indian Head		

Metals Analysis

Analyte	Result	RL	MDL	Units	DF	Prep	Analyzed	By	Method	Prep Method
Aluminum	10500	22	3.6	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Antimony	0.30 U	6.7	0.30	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Arsenic	6.9	0.56	0.33	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Barium	24.4	22	0.056	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Beryllium	0.38 B	0.56	0.067	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Cadmium	0.033 U	0.45	0.033	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Calcium	49.5 B	560	2.7	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Chromium	19.9	1.1	0.089	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Cobalt	5.3 B	5.6	0.078	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Copper	8.3	2.8	0.067	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Iron	26400	11	0.79	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Lead	8.7 B	11	0.16	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Magnesium	321 B	560	0.46	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Manganese	76.4	1.7	0.022	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Mercury	0.044 B	0.090	0.0058	mg/kg	1	02/26/06	02/26/06	JM	SW846 7471A [1]	SW846 7471A [4]
Nickel	4.5	4.5	0.12	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Potassium	312 B	560	0.79	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Selenium	0.97 B	11	0.39	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Silver	0.078 U	1.1	0.078	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Sodium	504 B	560	8.0	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Thallium	0.43 U	1.1	0.43	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Vanadium	32.5	5.6	0.033	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]
Zinc	13.3	2.2	0.12	mg/kg	1	02/24/06	02/27/06	RS	SW846 6010B [2]	SW846 3050B [3]

(1) Instrument QC Batch: MA4820
(2) Instrument QC Batch: MA4822
(3) Prep QC Batch: MP9264
(4) Prep QC Batch: MP9266

RL = Reporting Limit
MDL = Method Detection Limit

U = Indicates a result < MDL
B = Indicates a result > = MDL but < RL

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
		Percent Solids:	89.8
Project:	Indian Head		

General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Cyanide Reactivity [a]	< 0.40	0.40	mg/kg	40	02/28/06 09:21	ATX	SW846 CHAP7
Cyanide, Total	< 0.13	0.13	mg/kg	1	03/01/06 18:39	LM	SW846 9014
Solids, Percent	89.8		%	1	02/23/06	CP	EPA 160.3 M
Sulfide Reactivity [a]	< 9.0	9.0	mg/kg	40	02/28/06 12:20	ATX	SW846 CHAP7

(a) Analysis performed at Accutest Laboratories, Houston, TX.

RL = Reporting Limit

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1A	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8260B SW846 1311	Percent Solids:	89.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	F0069947.D	10	02/28/06	ATX	02/28/06	T:OP5564	T:VF1802
Run #2							

	Purge Volume
Run #1	5.0 ml
Run #2	

VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.050	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.050	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.050	0.0070	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.050	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.050	0.0070	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.050	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.030	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.050	0.0070	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.050	0.0060	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.050	0.0040	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	100%		73-139%
2037-26-5	Toluene-D8	94%		77-148%
460-00-4	4-Bromofluorobenzene	92%		84-150%
17060-07-0	1,2-Dichloroethane-D4	105%		66-139%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected MDL - Method Detection Limit
MCL = Maximum Contamination Level (40 CFR 261 6/96)
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1A	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8270C SW846 3510C	Percent Solids:	89.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	A14883.D	1	02/27/06	ATX	02/27/06	T:OP5556	T:EA1064
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

ABN TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.010	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.040	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.030	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.040	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.040	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.040	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.050	0.020	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	31%		12-69%
4165-62-2	Phenol-d5	18%		11-51%
118-79-6	2,4,6-Tribromophenol	41%		33-131%
4165-60-0	Nitrobenzene-d5	45%		40-117%
321-60-8	2-Fluorobiphenyl	52%		33-121%
1718-51-0	Terphenyl-d14	67%		35-142%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected MDL - Method Detection Limit
MCL = Maximum Contamination Level (40 CFR 261 6/96)
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1A	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8151 SW846 3510C	Percent Solids:	89.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	DD54800.D	1	02/28/06	ATX	02/27/06	T:OP5558	T:GDD986
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Herbicide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.015	0.011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.0020	0.00060	mg/l	
93-76-5	2,4,5-T	ND			0.0020	0.00090	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	226% [b]		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.
(b) Outside control limits due to matrix interference.

ND = Not detected MDL - Method Detection Limit
MCL = Maximum Contamination Level (40 CFR 261 6/96)
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1A	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
Method:	SW846 8081A SW846 3510C	Percent Solids:	89.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	GG26151.D	1	02/28/06	ATX	02/28/06	T:OP5561	T:GGG825
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Pesticide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.000070	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0019	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00019	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00010	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.000060	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0050	0.0078	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.0050	0.0020	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	91% [b]		18-110%
2051-24-3	Decachlorobiphenyl	97.5% [b]		24-125%

(a) Analysis performed at Accutest Laboratories, Houston, TX.
(b) Surrogate were adjusted due to double spiking.

ND = Not detected MDL - Method Detection Limit
MCL = Maximum Contamination Level (40 CFR 261 6/96)
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1A	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
		Percent Solids:	89.8
Project:	Indian Head		

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed	By	Method
Arsenic [a]	0.0072 B	D004	5.0	0.50	0.0010	mg/l	1	03/02/06	03/02/06	ATX	SW846 6010B [2]
Barium [a]	0.18 B	D005	100	1.0	0.00060	mg/l	1	03/02/06	03/02/06	ATX	SW846 6010B [2]
Cadmium [a]	0.00040 U	D006	1.0	0.0050	0.00040	mg/l	1	03/02/06	03/02/06	ATX	SW846 6010B [2]
Chromium [a]	0.0010 U	D007	5.0	0.010	0.0010	mg/l	1	03/02/06	03/02/06	ATX	SW846 6010B [2]
Lead [a]	0.025 B	D008	5.0	0.50	0.0020	mg/l	1	03/02/06	03/02/06	ATX	SW846 6010B [2]
Mercury [a]	0.00080 U	D009	0.20	0.0020	0.00080	mg/l	1	03/01/06	03/01/06	ATX	SW846 7470A [1]
Selenium [a]	0.0056 B	D010	1.0	0.50	0.0010	mg/l	1	03/02/06	03/02/06	ATX	SW846 6010B [2]
Silver [a]	0.00070 U	D011	5.0	0.010	0.00070	mg/l	1	03/02/06	03/02/06	ATX	SW846 6010B [2]

(1) Instrument QC Batch: T:MA2279
(2) Instrument QC Batch: T:MA2280
(3) Prep QC Batch: T:MP4491
(4) Prep QC Batch: T:MP4492

(a) Analysis performed at Accutest Laboratories, Houston, TX.

RL = Reporting Limit MDL = Method Detection Limit U = Indicates a result < MDL
MCL = Maximum Contamination Level (40 CFR 261 6/96) B = Indicates a result > = MDL but < RL

Accutest Laboratories

Report of Analysis

Client Sample ID:	115273-SF-013		
Lab Sample ID:	F38750-1A	Date Sampled:	02/21/06
Matrix:	SO - Soil	Date Received:	02/22/06
		Percent Solids:	89.8
Project:	Indian Head		

General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	5.1			1	02/27/06 13:20	LE	SW846 CHAP7
Ignitability (Flashpoint) [a]	> 200		Deg. F	1	02/28/06	CP	SW846 1010

(a) Not ignitable

RL = Reporting Limit

Misc. Forms

Custody Documents and Other Forms

Includes the following where applicable:

- **Chain of Custody**

CHAIN-OF-CUSTODY RECORD F38750

COC Number: 115273-022006
Purchase Order Number:

Shaw® The Shaw Group Inc.®

SHAW Environmental & Infrastructure, INC. - 5700 Thurston Ave Suite 116B - Virginia Beach, VA 23455 - (757) 363-7190

Lab Destination: Accutest
Lab Receiving Address: 4405 Vineland Road Suite C-1, Orlando FL 32811 (407)425-6700
Project Name: Indian Head
Sample Location: Select Fill Samples
Project Number: 115273
Shaw Contact: Natasha Kelley Sullivan
Shaw Contact Number: (410)529-7598
Client Rep: LANTDIV
Project Manager: Steve Carriere

Analysis Desired

Item No.	Sample Number	Date	Time	Matrix Water	Matrix Soil	Sample Description	Number of Containers	Full TCLP+RCISW-846	TPH DRO/GRO SW-846 8015M	TCL Volatiles+BTEX SW-846 5035/8260B	TCL Semivolatiles by SW-846 8270C	TCL Pest/PCBs SW-846 8081/8082	TAL Metals SW-846 6010/7000	Cyanide SW-846
1	115273-SF-013	02/2[illegible]/06	1600		X	Select Fill	3-4oz jar 5-6oz jar	X	X	X	X	X	X	X
2														
3														
4														
5														
6														
7														
8														

* HOLD SAMPLES UNTIL NOTIFIED BY N. SULLIVAN

Turnaround Time Required: ☐ 1 Week TAT,
Sampled By: Brian Harris, SHAW
COMMENTS:
Laboratory Report No.:

Transfer Number	Transfers Relinquished By	Date	Time	Transfers Accepted By	Date	Time
1	Brian Harris	2/24/2006	1600	[illegible]		
2	[illegible]			[illegible]	2/27/06	0900
3						
4						

Remarks:
Summary Report
Deliverables: EDD Excel
** Fax results to Natasha Sullivan (410) 529-7599

2.8

F38750: Chain of Custody
Page 1 of 2

ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION

ACCUTEST'S JOB NUMBER: F38750 CLIENT: Shaw E & I PROJECT: Indian Head

DATE/TIME RECEIVED: 2/22/06 0900 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 2-8

METHOD OF DELIVERY: FEDEX UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER

AIRBILL NUMBERS: 8542 8326 1550

COOLER INFORMATION

- [ ] CUSTODY SEAL NOT PRESENT OR NOT INTACT
- [ ] NO COC RECEIVED
- [ ] ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- [ ] SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- [ ] TEMPERATURE CRITERIA NOT MET

TRIP BLANK INFORMATION

- [x] TRIP BLANK NOT PROVIDED
- [ ] TRIP BLANK NOT ON COC
- [ ] TRIP BLANK INTACT
- [ ] TRIP BLANK NOT INTACT
- [ ] RECEIVED WATER TRIP BLANK
- [ ] RECEIVED SOIL TRIP BLANK

SAMPLE INFORMATION

- [ ] SAMPLE LABELS PRESENT ON ALL BOTTLES
- [ ] CORRECT NUMBER OF CONTAINERS USED
- [ ] SAMPLE RECEIVED IMPROPERLY PRESERVED
- [ ] INSUFFICIENT VOLUME FOR ANALYSIS
- [ ] TIMES ON COC DON'T MATCH LABEL
- [ ] ID'S ON COC DON'T MATCH LABEL
- [ ] VOC VIALS HAVE HEADSPACE (MACRO BUBBLES)
- [ ] BOTTLES RECEIVED BUT ANALYSIS NOT REQUESTED
- [ ] NO BOTTLES RECEIVED FOR ANALYSIS REQUESTED
- [ ] UNCLEAR FILTERING INSTRUCTIONS
- [ ] UNCLEAR COMPOSITING INSTRUCTIONS
- [ ] SAMPLE(S) RECEIVED BROKEN
- [ ] % SOLIDS JAR NOT RECEIVED

SOIL INFORMATION

NUMBER OF ENCORES ? 0

NUMBER OF 5035 FIELD KITS ? 0

SUMMARY OF COMMENTS:

TECHNICIAN SIGNATURE/DATE [signature] 2/22/06 TECHNICIAN SIGNATURE/DATE

3.1 3

F38750: Chain of Custody
Page 2 of 2

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GC/MS Volatiles

QC Data Summaries

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Method Blank Summary

Job Number: F38750
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VK1144-MB	K025571.D	1	02/25/06	NAF	n/a	n/a	VK1144

The QC reported here applies to the following samples: Method: SW846 8260B

F38750-1

CAS No.	Compound	Result	RL	MDL	Units	Q
67-64-1	Acetone	ND	50	25	ug/kg	
71-43-2	Benzene	ND	5.0	2.0	ug/kg	
75-27-4	Bromodichloromethane	ND	5.0	2.0	ug/kg	
75-25-2	Bromoform	ND	5.0	2.0	ug/kg	
108-90-7	Chlorobenzene	ND	5.0	2.0	ug/kg	
75-00-3	Chloroethane	ND	5.0	2.0	ug/kg	
67-66-3	Chloroform	ND	5.0	2.0	ug/kg	
75-15-0	Carbon disulfide	ND	5.0	2.0	ug/kg	
56-23-5	Carbon tetrachloride	ND	5.0	2.0	ug/kg	
75-34-3	1,1-Dichloroethane	ND	5.0	2.0	ug/kg	
75-35-4	1,1-Dichloroethylene	ND	5.0	2.0	ug/kg	
107-06-2	1,2-Dichloroethane	ND	5.0	2.0	ug/kg	
78-87-5	1,2-Dichloropropane	ND	5.0	2.0	ug/kg	
124-48-1	Dibromochloromethane	ND	5.0	2.0	ug/kg	
156-59-2	cis-1,2-Dichloroethylene	ND	5.0	2.0	ug/kg	
10061-01-5	cis-1,3-Dichloropropene	ND	5.0	2.0	ug/kg	
156-60-5	trans-1,2-Dichloroethylene	ND	5.0	2.0	ug/kg	
10061-02-6	trans-1,3-Dichloropropene	ND	5.0	2.0	ug/kg	
100-41-4	Ethylbenzene	ND	5.0	2.0	ug/kg	
591-78-6	2-Hexanone	ND	25	10	ug/kg	
108-10-1	4-Methyl-2-pentanone	ND	25	10	ug/kg	
74-83-9	Methyl bromide	ND	5.0	2.0	ug/kg	
74-87-3	Methyl chloride	ND	5.0	2.0	ug/kg	
75-09-2	Methylene chloride	5.7	10	5.0	ug/kg	J
78-93-3	Methyl ethyl ketone	ND	25	10	ug/kg	
100-42-5	Styrene	ND	5.0	2.0	ug/kg	
71-55-6	1,1,1-Trichloroethane	ND	5.0	2.0	ug/kg	
79-34-5	1,1,2,2-Tetrachloroethane	ND	5.0	2.0	ug/kg	
79-00-5	1,1,2-Trichloroethane	ND	5.0	2.0	ug/kg	
127-18-4	Tetrachloroethylene	ND	5.0	2.0	ug/kg	
108-88-3	Toluene	ND	5.0	2.0	ug/kg	
79-01-6	Trichloroethylene	ND	5.0	2.0	ug/kg	
75-01-4	Vinyl chloride	ND	5.0	2.0	ug/kg	
1330-20-7	Xylene (total)	ND	15	4.5	ug/kg	

Method Blank Summary

Job Number: F38750
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VK1144-MB	K025571.D	1	02/25/06	NAF	n/a	n/a	VK1144

The QC reported here applies to the following samples: Method: SW846 8260B

F38750-1

CAS No.	Surrogate Recoveries		Limits
1868-53-7	Dibromofluoromethane	99%	78-123%
2037-26-5	Toluene-D8	100%	71-137%
460-00-4	4-Bromofluorobenzene	109%	61-157%
17060-07-0	1,2-Dichloroethane-D4	94%	74-125%

Blank Spike Summary

Job Number: F38750
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VK1144-BS	K025570.D	1	02/25/06	NAF	n/a	n/a	VK1144

The QC reported here applies to the following samples: Method: SW846 8260B

F38750-1

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
67-64-1	Acetone	250	346	138*	51-136
71-43-2	Benzene	50	51.3	103	74-124
75-27-4	Bromodichloromethane	50	51.7	103	74-124
75-25-2	Bromoform	50	56.0	112	79-127
108-90-7	Chlorobenzene	50	52.3	105	78-117
75-00-3	Chloroethane	50	51.9	104	63-147
67-66-3	Chloroform	50	49.4	99	75-121
75-15-0	Carbon disulfide	50	59.5	119	59-148
56-23-5	Carbon tetrachloride	50	50.5	101	67-131
75-34-3	1,1-Dichloroethane	50	51.9	104	71-118
75-35-4	1,1-Dichloroethylene	50	53.0	106	64-126
107-06-2	1,2-Dichloroethane	50	49.1	98	72-120
78-87-5	1,2-Dichloropropane	50	55.3	111	74-126
124-48-1	Dibromochloromethane	50	55.2	110	78-120
156-59-2	cis-1,2-Dichloroethylene	50	50.9	102	75-124
10061-01-5	cis-1,3-Dichloropropene	50	59.6	119	72-120
156-60-5	trans-1,2-Dichloroethylene	50	55.5	111	70-122
10061-02-6	trans-1,3-Dichloropropene	50	61.8	124*	75-118
100-41-4	Ethylbenzene	50	51.7	103	77-120
591-78-6	2-Hexanone	250	363	145*	68-136
108-10-1	4-Methyl-2-pentanone	250	343	137*	69-136
74-83-9	Methyl bromide	50	47.3	95	52-156
74-87-3	Methyl chloride	50	68.4	137	63-142
75-09-2	Methylene chloride	50	59.5	119	51-142
78-93-3	Methyl ethyl ketone	250	345	138	63-138
100-42-5	Styrene	50	49.7	99	74-120
71-55-6	1,1,1-Trichloroethane	50	49.2	98	70-131
79-34-5	1,1,2,2-Tetrachloroethane	50	48.0	96	76-121
79-00-5	1,1,2-Trichloroethane	50	54.5	109	77-118
127-18-4	Tetrachloroethylene	50	60.4	121	68-127
108-88-3	Toluene	50	52.8	106	74-118
79-01-6	Trichloroethylene	50	53.1	106	72-122
75-01-4	Vinyl chloride	50	59.1	118	64-144
1330-20-7	Xylene (total)	150	150	100	78-122

Blank Spike Summary

Job Number: F38750
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VK1144-BS	K025570.D	1	02/25/06	NAF	n/a	n/a	VK1144

The QC reported here applies to the following samples: Method: SW846 8260B

F38750-1

CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	99%	78-123%
2037-26-5	Toluene-D8	102%	71-137%
460-00-4	4-Bromofluorobenzene	89%	61-157%
17060-07-0	1,2-Dichloroethane-D4	96%	74-125%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F38750
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F38818-3MS	K025577.D	1	02/25/06	NAF	n/a	n/a	VK1144
F38818-3MSD	K025578.D	1	02/25/06	NAF	n/a	n/a	VK1144
F38818-3	K025575.D	1	02/25/06	NAF	n/a	n/a	VK1144

The QC reported here applies to the following samples: Method: SW846 8260B

F38750-1

CAS No.	Compound	F38818-3 ug/kg	Q	Spike ug/kg	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
67-64-1	Acetone	ND		263	163	62	156	60	4	14-140/33
71-43-2	Benzene	ND		52.6	47.9	91	43.4	84	10	63-135/23
75-27-4	Bromodichloromethane	ND		52.6	47.3	90	42.9	83	10	63-126/23
75-25-2	Bromoform	ND		52.6	45.3	86	40.8	79	10	54-109/24
108-90-7	Chlorobenzene	ND		52.6	45.4	86	38.4	74	17	64-130/24
75-00-3	Chloroethane	ND		52.6	53.2	101	48.5	93	9	53-172/28
67-66-3	Chloroform	ND		52.6	47.4	90	43.8	84	8	68-131/24
75-15-0	Carbon disulfide	ND		52.6	51.3	98	41.4	80	21	47-165/29
56-23-5	Carbon tetrachloride	ND		52.6	45.1	86	41.2	79	9	64-148/24
75-34-3	1,1-Dichloroethane	ND		52.6	51.2	97	46.5	90	10	64-130/25
75-35-4	1,1-Dichloroethylene	ND		52.6	50.8	97	45.2	87	12	55-149/28
107-06-2	1,2-Dichloroethane	ND		52.6	48.0	91	44.9	87	7	60-114/22
78-87-5	1,2-Dichloropropane	ND		52.6	51.4	98	46.1	89	11	65-128/23
124-48-1	Dibromochloromethane	ND		52.6	48.4	92	49.2	95	2	60-119/23
156-59-2	cis-1,2-Dichloroethylene	ND		52.6	46.4	88	40.7	78	13	66-132/24
10061-01-5	cis-1,3-Dichloropropene	ND		52.6	50.2	95	41.4	80	19	57-118/25
156-60-5	trans-1,2-Dichloroethylene	ND		52.6	51.7	98	43.1	83	18	63-137/27
10061-02-6	trans-1,3-Dichloropropene	ND		52.6	53.7	102	51.8	100	4	58-115/25
100-41-4	Ethylbenzene	ND		52.6	43.7	83	40.3	78	8	63-142/25
591-78-6	2-Hexanone	ND		263	268	102	267	103	0	35-109/34
108-10-1	4-Methyl-2-pentanone	ND		263	293	111*	273	105*	7	44-99/32
74-83-9	Methyl bromide	ND		52.6	50.6	96	46.9	90	8	38-188/27
74-87-3	Methyl chloride	ND		52.6	63.1	120	56.8	109	11	57-160/29
75-09-2	Methylene chloride	ND		52.6	55.5	106	50.7	98	9	40-183/34
78-93-3	Methyl ethyl ketone	ND		263	230	87	209	81	10	27-112/32
100-42-5	Styrene	ND		52.6	39.5	75	31.5	61	23	54-130/26
71-55-6	1,1,1-Trichloroethane	ND		52.6	47.6	91	43.8	84	8	70-149/25
79-34-5	1,1,2,2-Tetrachloroethane	ND		52.6	63.3	120	62.6	121	1	45-121/33
79-00-5	1,1,2-Trichloroethane	ND		52.6	52.7	100	55.2	106	5	60-114/25
127-18-4	Tetrachloroethylene	ND		52.6	44.8	85	41.8	81	7	54-154/27
108-88-3	Toluene	ND		52.6	48.6	92	49.3	95	1	62-142/29
79-01-6	Trichloroethylene	ND		52.6	45.3	86	38.4	74	16	59-143/25
75-01-4	Vinyl chloride	ND		52.6	57.3	109	52.2	101	9	64-165/27
1330-20-7	Xylene (total)	ND		158	132	84	114	73	15	64-142/24

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F38750
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F38818-3MS	K025577.D	1	02/25/06	NAF	n/a	n/a	VK1144
F38818-3MSD	K025578.D	1	02/25/06	NAF	n/a	n/a	VK1144
F38818-3	K025575.D	1	02/25/06	NAF	n/a	n/a	VK1144

The QC reported here applies to the following samples: Method: SW846 8260B

F38750-1

CAS No.	Surrogate Recoveries	MS	MSD	F38818-3	Limits
1868-53-7	Dibromofluoromethane	101%	102%	103%	78-123%
2037-26-5	Toluene-D8	105%	121%	120%	71-137%
460-00-4	4-Bromofluorobenzene	120%	121%	137%	61-157%
17060-07-0	1,2-Dichloroethane-D4	105%	104%	102%	74-125%

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GC Volatiles

QC Data Summaries

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Method Blank Summary

Job Number: F38750
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GHH941-MB	HH019913.D	1	03/01/06	AB	n/a	n/a	GHH941

The QC reported here applies to the following samples: Method: SW846 8015

F38750-1

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries		Limits
460-00-4	4-Bromofluorobenzene	91%	62-135%
98-08-8	aaa-Trifluorotoluene	90%	65-118%

Blank Spike Summary

Job Number: F38750
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GHH941-BS	HH019912.D	1	03/01/06	AB	n/a	n/a	GHH941

The QC reported here applies to the following samples: Method: SW846 8015

F38750-1

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	17.3	87	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	87%	62-135%
98-08-8	aaa-Trifluorotoluene	84%	65-118%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F38750
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F38750-1MS	HH019915.D	1	03/01/06	AB	n/a	n/a	GHH941
F38750-1MSD	HH019916.D	1	03/01/06	AB	n/a	n/a	GHH941
F38750-1 [a]	HH019914.D	1	03/01/06	AB	n/a	n/a	GHH941

The QC reported here applies to the following samples: Method: SW846 8015

F38750-1

CAS No.	Compound	F38750-1 mg/kg	Q	Spike mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND		27.6	27.3	99	26.0	94	5	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F38750-1	Limits
460-00-4	4-Bromofluorobenzene	98%	100%	88%	62-135%
98-08-8	aaa-Trifluorotoluene	93%	99%	90%	65-118%

(a) Sample was received in a bulk container and preserved within 48 hours of sampling.

Metals Analysis

QC Data Summaries

Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY
Part 2 - Method Blanks

Login Number: F38750
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9264
Matrix Type: SOLID

Methods: SW846 6010B
Units: mg/kg

Prep Date: 02/24/06

Metal	RL	IDL	MB raw	final
Aluminum	20	1.3	3.7	<20
Antimony	6.0	.15	0.11	<6.0
Arsenic	0.50	.21	-0.21	<0.50
Barium	20	.05	0.27	<20
Beryllium	0.50	.02	-0.030	<0.50
Cadmium	0.40	.05	0.019	<0.40
Calcium	500	1.6	9.8	<500
Chromium	1.0	.05	0.064	<1.0
Cobalt	5.0	.05	-0.023	<5.0
Copper	2.5	.04	0.060	<2.5
Iron	10	1.6	2.4	<10
Lead	10	.12	0.050	<10
Magnesium	500	.99	1.3	<500
Manganese	1.5	.02	0.87	<1.5
Molybdenum	5.0	.08		
Nickel	4.0	.06	-0.013	<4.0
Potassium	500	1.6	5.0	<500
Selenium	10	.16	0.054	<10
Silver	1.0	.06	-0.012	<1.0
Sodium	500	6.5	15.0	<500
Thallium	1.0	.18	-0.38	<1.0
Tin	5.0	.14		
Vanadium	5.0	.06	0.0	<5.0
Zinc	2.0	.11	0.33	<2.0

Associated samples MP9264: F38750-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F38750
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9264
Matrix Type: SOLID

Methods: SW846 6010B
Units: mg/kg

Prep Date: 02/24/06 02/24/06

Metal	F38735-1 Original	DUP	RPD	QC Limits	F38735-1 Original	MS	Spikelot MPFLICP	% Rec	QC Limits
Aluminum	2830	3200	12.3	0-20	2830	6050	3010	106.8	75-125
Antimony	0.42	0.0	200.0(a)	0-20	0.42	77.5	104	74.2N(c)	75-125
Arsenic	0.36	0.48	28.6 (a)	0-20	0.36	422	416	101.4	75-125
Barium	4.6	4.6	0.0	0-20	4.6	420	416	99.9	75-125
Beryllium	0.0	0.0	NC	0-20	0.0	11.2	10.4	107.7	75-125
Cadmium	0.0	0.0	NC	0-20	0.0	10.3	10.4	99.1	75-125
Calcium	12800	10300	21.6*(b)	0-20	12800	15200	2600	92.4	75-125
Chromium	3.3	3.5	5.9	0-20	3.3	46.0	41.6	102.7	75-125
Cobalt	0.17	0.13	26.7 (a)	0-20	0.17	104	104	99.9	75-125
Copper	6.4	5.6	13.3	0-20	6.4	63.0	52	108.9	75-125
Iron	337	338	0.3	0-20	337	3200	2810	102.0	75-125
Lead	5.9	6.0	1.7	0-20	5.9	110	104	100.1	75-125
Magnesium	148	131	12.2	0-20	148	2760	2600	100.5	75-125
Manganese	10.8	9.2	16.0	0-20	10.8	119	104	104.1	75-125
Molybdenum									
Nickel	0.85	0.72	16.6	0-20	0.85	107	104	102.1	75-125
Potassium	32.9	31.0	5.9	0-20	32.9	2440	2600	92.6	75-125
Selenium	0.36	0.0	200.0(a)	0-20	0.36	406	416	97.6	75-125
Silver	0.0	0.0	NC	0-20	0.0	10.7	10.4	102.9	75-125
Sodium	157	164	4.4	0-20	157	2570	2600	92.9	75-125
Thallium	0.0	0.0	NC	0-20	0.0	414	416	99.6	75-125
Tin									
Vanadium	2.9	2.5	14.8	0-20	2.9	106	104	99.2	75-125
Zinc	6.7	6.1	9.4	0-20	6.7	110	104	99.4	75-125

Associated samples MP9264: F38750-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(N) Matrix Spike Rec. outside of QC limits
(anr) Analyte not requested
(a) RPD acceptable due to low duplicate and sample concentrations.
(b) High RPD due to possible sample nonhomogeneity.
(c) Spike recovery indicates possible matrix interference and/or sample nonhomogeneity.

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F38750
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9264
Matrix Type: SOLID

Methods: SW846 6010B
Units: mg/kg

Prep Date: 02/24/06

Metal	F38735-1 Original	MSD	Spikelot MPFLICP	% Rec	MSD RPD	QC Limit
Aluminum	2830	6150	2840	116.7	1.6	20
Antimony	0.42	68.9	98.1	69.8N(a)	11.7	20
Arsenic	0.36	397	392	101.1	6.1	20
Barium	4.6	394	392	99.3	6.4	20
Beryllium	0.0	10.6	9.81	108.1	5.5	20
Cadmium	0.0	9.7	9.8	98.9	6.0	20
Calcium	12800	15500	2450	110.1	2.0	20
Chromium	3.3	43.4	39.2	102.2	5.8	20
Cobalt	0.17	97.2	98.1	98.9	6.8	20
Copper	6.4	64.4	49	118.3	2.2	20
Iron	337	3040	2650	102.1	5.1	20
Lead	5.9	105	98.1	101.1	4.7	20
Magnesium	148	2620	2450	100.8	5.2	20
Manganese	10.8	110	98.1	101.2	7.9	20
Molybdenum						
Nickel	0.85	101	98.1	102.1	5.8	20
Potassium	32.9	2290	2450	92.1	6.3	20
Selenium	0.36	380	392	96.8	6.6	20
Silver	0.0	10	9.8	102.0	6.8	20
Sodium	157	2410	2450	91.9	6.4	20
Thallium	0.0	389	392	99.2	6.2	20
Tin						
Vanadium	2.9	99.2	98.1	98.2	6.6	20
Zinc	6.7	104	98.1	99.2	5.6	20

Associated samples MP9264: F38750-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(N) Matrix Spike Rec. outside of QC limits
(anr) Analyte not requested
(a) Spike recovery indicates possible matrix interference and/or sample nonhomogeneity.

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F38750
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9264
Matrix Type: SOLID

Methods: SW846 6010B
Units: mg/kg

Prep Date: 02/24/06

Metal	BSP Result	Spikelot MPFLICP	% Rec	QC Limits
Aluminum	2890	2900	99.7	80-120
Antimony	104	100	104.0	80-120
Arsenic	413	400	103.3	80-120
Barium	402	400	100.5	80-120
Beryllium	10.9	10	109.0	80-120
Cadmium	10.2	10	102.0	80-120
Calcium	2630	2500	105.2	80-120
Chromium	41.9	40	104.8	80-120
Cobalt	102	100	102.0	80-120
Copper	53.7	50	107.4	80-120
Iron	2810	2700	104.1	80-120
Lead	102	100	102.0	80-120
Magnesium	2520	2500	100.8	80-120
Manganese	106	100	106.0	80-120
Molybdenum				
Nickel	105	100	105.0	80-120
Potassium	2130	2500	85.2	80-120
Selenium	394	400	98.5	80-120
Silver	10.1	10	101.0	80-120
Sodium	2250	2500	90.0	80-120
Thallium	406	400	101.5	80-120
Tin				
Vanadium	101	100	101.0	80-120
Zinc	102	100	102.0	80-120

Associated samples MP9264: F38750-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

SERIAL DILUTION RESULTS SUMMARY

Login Number: F38750
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9264
Matrix Type: SOLID

Methods: SW846 6010B
Units: ug/l

Prep Date: 02/24/06

Metal	F38735-1 Original	SDL 1:5	RPD	QC Limits
Aluminum	27200	28000	2.8	0-10
Antimony	4.03	7.64	89.6 (a)	0-10
Arsenic	3.44	12.1	251.2(a)	0-10
Barium	44.4	46.0	3.6	0-10
Beryllium	0.00	0.00	NC	0-10
Cadmium	0.00	0.00	NC	0-10
Calcium	123000	131000	6.9	0-10
Chromium	32.2	33.0	2.7	0-10
Cobalt	1.61	0.00	100.0(a)	0-10
Copper	61.2	62.3	1.9	0-10
Iron	3240	3480	7.4	0-10
Lead	57.0	48.9	14.2 (a)	0-10
Magnesium	1420	1510	6.0	0-10
Manganese	104	110	5.7	0-10
Molybdenum				
Nickel	8.18	8.62	5.4	0-10
Potassium	317	245	22.7 (a)	0-10
Selenium	3.45	8.79	154.8(a)	0-10
Silver	0.00	0.00	NC	0-10
Sodium	1510	2040	34.9 (a)	0-10
Thallium	0.00	0.00	NC	0-10
Tin				
Vanadium	28.2	29.9	6.0	0-10
Zinc	64.5	104	60.5*(b)	0-10

Associated samples MP9264: F38750-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested
(a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).
(b) Serial dilution indicates possible matrix interference.

BLANK RESULTS SUMMARY
Part 2 - Method Blanks

Login Number: F38750
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9266
Matrix Type: SOLID

Methods: SW846 7471A
Units: mg/kg

Prep Date: 02/26/06

Metal	RL	IDL	MB raw	final
Mercury	0.083	.0018	0.0094	<0.083

Associated samples MP9266: F38750-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

6.2.1

6

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F38750
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9266
Matrix Type: SOLID

Methods: SW846 7471A
Units: mg/kg

Prep Date:			02/26/06					02/26/06	
Metal	F38721-1 Original	DUP	RPD	QC Limits	F38721-1 Original	MS	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.013	0.012	8.0	0-68	0.013	0.30	0.29	100.5	47-157

Associated samples MP9266: F38750-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(N) Matrix Spike Rec. outside of QC limits
(anr) Analyte not requested

6.2.2

6

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F38750
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9266
Matrix Type: SOLID

Methods: SW846 7471A
Units: mg/kg

Prep Date: 02/26/06

Metal	F38721-1 Original	MSD	Spikelot HGFLWS1	% Rec	MSD RPD	QC Limit
Mercury	0.013	0.28	0.29	92.0	6.9	30

Associated samples MP9266: F38750-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(N) Matrix Spike Rec. outside of QC limits
(anr) Analyte not requested

6.2.2

6

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F38750
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9266
Matrix Type: SOLID

Methods: SW846 7471A
Units: mg/kg

Prep Date: 02/26/06

Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.25	0.25	100.0	80-120

Associated samples MP9266: F38750-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

6.2.3

6

General Chemistry

QC Data Summaries

Includes the following where applicable:

- Method Blank and Blank Spike Summaries
- Duplicate Summaries
- Matrix Spike Summaries

METHOD BLANK AND SPIKE RESULTS SUMMARY
GENERAL CHEMISTRY

Login Number: F38750
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

Analyte	Batch ID	RL	MB Result	Units	Spike Amount	BSP Result	BSP %Recov	QC Limits
Cyanide, Total	GP7565/GN19973	0.12	<0.12	mg/kg	1.15	1.20	104.0	50-150%

Associated Samples:
Batch GP7565: F38750-1

7.1

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DUPLICATE RESULTS SUMMARY
GENERAL CHEMISTRY

Login Number: F38750
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

Analyte	Batch ID	QC Sample	Units	Original Result	DUP Result	RPD	QC Limits
Corrosivity as pH	GN19945	F38750-1A		5.1	5.3		0-%
Cyanide, Total	GP7565/GN19973	F38750-1	mg/kg	<0.13	<0.12	0.0	0-30%
Ignitability (Flashpoint)	GN19963	F38750-1A	Deg. F	>200	>200		0-38%
Solids, Percent	GN19907	F38786-22	%	79.7	79.8	0.1	0-30%

Associated Samples:
Batch GN19907: F38750-1
Batch GN19945: F38750-1A
Batch GN19963: F38750-1A
Batch GP7565: F38750-1

7.2
7

MATRIX SPIKE RESULTS SUMMARY
GENERAL CHEMISTRY

Login Number: F38750
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

Analyte	Batch ID	QC Sample	Units	Original Result	Spike Amount	MS Result	%Rec	QC Limits
Cyanide, Total	GP7565/GN19973	F38750-1	mg/kg	<0.13	1.28	1.1	85.6	50-150%

Associated Samples:
Batch GP7565: F38750-1

7.3

7

GC/MS Volatiles

QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Leachate Blank Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VF1802-LB	F0069946.D	10	02/28/06	RM	n/a	n/a	VF1802

The QC reported here applies to the following samples: Method: SW846 8260B

F38750-1A

CAS No.	Compound	Result	RL	Units	Q
71-43-2	Benzene	ND	50	ug/l	
108-90-7	Chlorobenzene	ND	50	ug/l	
67-66-3	Chloroform	ND	50	ug/l	
56-23-5	Carbon tetrachloride	ND	50	ug/l	
75-35-4	1,1-Dichloroethylene	ND	50	ug/l	
107-06-2	1,2-Dichloroethane	ND	50	ug/l	
78-93-3	Methyl ethyl ketone	ND	100	ug/l	
127-18-4	Tetrachloroethylene	ND	50	ug/l	
79-01-6	Trichloroethylene	ND	50	ug/l	
75-01-4	Vinyl chloride	ND	50	ug/l	

CAS No.	Surrogate Recoveries		Limits
1868-53-7	Dibromofluoromethane	101%	73-139%
17060-07-0	1,2-Dichloroethane-D4	101%	66-139%
2037-26-5	Toluene-D8	90%	77-148%
460-00-4	4-Bromofluorobenzene	88%	84-150%

Blank Spike Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VF1802-BS	F0069927.D	10	02/28/06	RM	n/a	n/a	VF1802

The QC reported here applies to the following samples: Method: SW846 8260B

F38750-1A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
71-43-2	Benzene	250	267	107	67-118
108-90-7	Chlorobenzene	250	247	99	72-116
67-66-3	Chloroform	250	263	105	66-117
56-23-5	Carbon tetrachloride	250	294	118	67-131
75-35-4	1,1-Dichloroethylene	250	288	115	52-143
107-06-2	1,2-Dichloroethane	250	267	107	61-120
78-93-3	Methyl ethyl ketone	1250	1290	103	47-128
127-18-4	Tetrachloroethylene	250	262	105	72-128
79-01-6	Trichloroethylene	250	269	108	69-120
75-01-4	Vinyl chloride	250	197	79	59-145

CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	100%	73-139%
17060-07-0	1,2-Dichloroethane-D4	101%	66-139%
2037-26-5	Toluene-D8	94%	77-148%
460-00-4	4-Bromofluorobenzene	87%	84-150%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F38750-1AMS	F0069948.D	10	02/28/06	RM	n/a	n/a	VF1802
F38750-1AMSD	F0069949.D	10	02/28/06	RM	n/a	n/a	VF1802
F38750-1A	F0069947.D	10	02/28/06	RM	02/28/06	OP5564	VF1802

The QC reported here applies to the following samples: Method: SW846 8260B

F38750-1A

CAS No.	Compound	F38750-1A ug/l	Q	Spike ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
71-43-2	Benzene	ND		250	280	112	276	110	1	65-122/15
108-90-7	Chlorobenzene	ND		250	253	101	243	97	4	72-118/20
67-66-3	Chloroform	ND		250	272	109	269	108	1	65-120/20
56-23-5	Carbon tetrachloride	ND		250	296	118	297	119	0	64-135/23
75-35-4	1,1-Dichloroethylene	ND		250	306	122	304	122	1	55-140/25
107-06-2	1,2-Dichloroethane	ND		250	273	109	286	114	5	57-125/25
78-93-3	Methyl ethyl ketone	ND		1250	1090	87	1190	95	9	43-125/29
127-18-4	Tetrachloroethylene	ND		250	269	108	254	102	6	69-132/21
79-01-6	Trichloroethylene	ND		250	265	106	262	105	1	70-120/19
75-01-4	Vinyl chloride	ND		250	278	111	291	116	5	51-147/24

CAS No.	Surrogate Recoveries	MS	MSD	F38750-1A	Limits
1868-53-7	Dibromofluoromethane	109%	111%	100%	73-139%
17060-07-0	1,2-Dichloroethane-D4	110%	116%	105%	66-139%
2037-26-5	Toluene-D8	98%	98%	94%	77-148%
460-00-4	4-Bromofluorobenzene	86%	88%	92%	84-150%

(a) Analyzed outside of the 12 hour tune window.

GC/MS Semi-volatiles

QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Method Blank Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5556-MB	A14881.D	1	02/27/06	SC	02/27/06	OP5556	EA1064

The QC reported here applies to the following samples: Method: SW846 8270C

F38750-1A

CAS No.	Compound	Result	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	50	10	ug/l	
	3&4-Methylphenol	ND	50	10	ug/l	
87-86-5	Pentachlorophenol	ND	250	120	ug/l	
95-95-4	2,4,5-Trichlorophenol	ND	50	10	ug/l	
88-06-2	2,4,6-Trichlorophenol	ND	50	20	ug/l	
106-46-7	1,4-Dichlorobenzene	ND	50	20	ug/l	
121-14-2	2,4-Dinitrotoluene	ND	50	20	ug/l	
118-74-1	Hexachlorobenzene	ND	50	30	ug/l	
87-68-3	Hexachlorobutadiene	ND	50	20	ug/l	
67-72-1	Hexachloroethane	ND	50	20	ug/l	
98-95-3	Nitrobenzene	ND	50	20	ug/l	
110-86-1	Pyridine	ND	50	10	ug/l	

CAS No.	Surrogate Recoveries		Limits
367-12-4	2-Fluorophenol	30%	12-69%
4165-62-2	Phenol-d5	19%	11-51%
118-79-6	2,4,6-Tribromophenol	47%	33-131%
4165-60-0	Nitrobenzene-d5	45%	40-117%
321-60-8	2-Fluorobiphenyl	56%	33-121%
1718-51-0	Terphenyl-d14	80%	35-142%

Method Blank Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5559-MB	A14886.D	1	02/27/06	SC	02/27/06	OP5559	EA1064

The QC reported here applies to the following samples: Method: SW846 8270C

F38750-1

CAS No.	Compound	Result	RL	MDL	Units	Q
65-85-0	Benzoic acid	ND	830	270	ug/kg	
95-57-8	2-Chlorophenol	ND	170	50	ug/kg	
59-50-7	4-Chloro-3-methyl phenol	ND	170	70	ug/kg	
120-83-2	2,4-Dichlorophenol	ND	170	52	ug/kg	
105-67-9	2,4-Dimethylphenol	ND	170	89	ug/kg	
51-28-5	2,4-Dinitrophenol	ND	830	92	ug/kg	
534-52-1	4,6-Dinitro-o-cresol	ND	330	110	ug/kg	
95-48-7	2-Methylphenol	ND	170	75	ug/kg	
	3&4-Methylphenol	ND	170	100	ug/kg	
88-75-5	2-Nitrophenol	ND	170	68	ug/kg	
100-02-7	4-Nitrophenol	ND	170	120	ug/kg	
87-86-5	Pentachlorophenol	ND	830	100	ug/kg	
108-95-2	Phenol	ND	170	72	ug/kg	
95-95-4	2,4,5-Trichlorophenol	ND	170	55	ug/kg	
88-06-2	2,4,6-Trichlorophenol	ND	170	57	ug/kg	
83-32-9	Acenaphthene	ND	170	51	ug/kg	
208-96-8	Acenaphthylene	ND	170	60	ug/kg	
120-12-7	Anthracene	ND	170	81	ug/kg	
56-55-3	Benzo(a)anthracene	ND	170	62	ug/kg	
50-32-8	Benzo(a)pyrene	ND	170	46	ug/kg	
205-99-2	Benzo(b)fluoranthene	ND	170	55	ug/kg	
191-24-2	Benzo(g,h,i)perylene	ND	170	77	ug/kg	
207-08-9	Benzo(k)fluoranthene	ND	170	75	ug/kg	
101-55-3	4-Bromophenyl phenyl ether	ND	170	62	ug/kg	
85-68-7	Butyl benzyl phthalate	ND	170	69	ug/kg	
100-51-6	Benzyl Alcohol	ND	170	57	ug/kg	
91-58-7	2-Chloronaphthalene	ND	170	60	ug/kg	
106-47-8	4-Chloroaniline	ND	170	53	ug/kg	
86-74-8	Carbazole	ND	170	140	ug/kg	
218-01-9	Chrysene	ND	170	66	ug/kg	
111-91-1	bis(2-Chloroethoxy)methane	ND	170	49	ug/kg	
111-44-4	bis(2-Chloroethyl)ether	ND	170	67	ug/kg	
108-60-1	bis(2-Chloroisopropyl)ether	ND	170	63	ug/kg	
7005-72-3	4-Chlorophenyl phenyl ether	ND	170	38	ug/kg	
95-50-1	1,2-Dichlorobenzene	ND	170	49	ug/kg	
541-73-1	1,3-Dichlorobenzene	ND	170	69	ug/kg	

Method Blank Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5559-MB	A14886.D	1	02/27/06	SC	02/27/06	OP5559	EA1064

The QC reported here applies to the following samples: Method: SW846 8270C

F38750-1

CAS No.	Compound	Result	RL	MDL	Units	Q
106-46-7	1,4-Dichlorobenzene	ND	170	64	ug/kg	
121-14-2	2,4-Dinitrotoluene	ND	170	54	ug/kg	
606-20-2	2,6-Dinitrotoluene	ND	170	71	ug/kg	
91-94-1	3,3'-Dichlorobenzidine	ND	330	130	ug/kg	
53-70-3	Dibenzo(a,h)anthracene	ND	170	70	ug/kg	
132-64-9	Dibenzofuran	ND	170	74	ug/kg	
84-74-2	Di-n-butyl phthalate	ND	170	58	ug/kg	
117-84-0	Di-n-octyl phthalate	ND	170	68	ug/kg	
84-66-2	Diethyl phthalate	ND	170	72	ug/kg	
131-11-3	Dimethyl phthalate	ND	170	55	ug/kg	
117-81-7	bis(2-Ethylhexyl)phthalate	ND	170	67	ug/kg	
206-44-0	Fluoranthene	ND	170	52	ug/kg	
86-73-7	Fluorene	ND	170	44	ug/kg	
118-74-1	Hexachlorobenzene	ND	170	73	ug/kg	
87-68-3	Hexachlorobutadiene	ND	170	61	ug/kg	
77-47-4	Hexachlorocyclopentadiene	ND	170	29	ug/kg	
67-72-1	Hexachloroethane	ND	170	73	ug/kg	
193-39-5	Indeno(1,2,3-cd)pyrene	ND	170	92	ug/kg	
78-59-1	Isophorone	ND	170	57	ug/kg	
91-57-6	2-Methylnaphthalene	ND	170	58	ug/kg	
88-74-4	2-Nitroaniline	ND	170	61	ug/kg	
99-09-2	3-Nitroaniline	ND	170	58	ug/kg	
100-01-6	4-Nitroaniline	ND	170	160	ug/kg	
91-20-3	Naphthalene	ND	170	87	ug/kg	
98-95-3	Nitrobenzene	ND	170	67	ug/kg	
621-64-7	N-Nitroso-di-n-propylamine	ND	170	63	ug/kg	
86-30-6	N-Nitrosodiphenylamine	ND	170	70	ug/kg	
85-01-8	Phenanthrene	ND	170	59	ug/kg	
129-00-0	Pyrene	ND	170	65	ug/kg	
120-82-1	1,2,4-Trichlorobenzene	ND	170	53	ug/kg	

CAS No.	Surrogate Recoveries		Limits
367-12-4	2-Fluorophenol	42%	26-124%
4165-62-2	Phenol-d5	28%	28-119%

Method Blank Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5559-MB	A14886.D	1	02/27/06	SC	02/27/06	OP5559	EA1064

The QC reported here applies to the following samples: Method: SW846 8270C

F38750-1

CAS No.	Surrogate Recoveries		Limits
118-79-6	2,4,6-Tribromophenol	53%	26-134%
4165-60-0	Nitrobenzene-d5	59%	27-117%
321-60-8	2-Fluorobiphenyl	68%	24-113%
1718-51-0	Terphenyl-d14	89%	37-147%

Blank Spike Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5556-BS	A14882.D	1	02/27/06	SC	02/27/06	OP5556	EA1064

The QC reported here applies to the following samples: Method: SW846 8270C

F38750-1A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
95-48-7	2-Methylphenol	500	295	59	19-104
	3&4-Methylphenol	1000	498	50	12-101
87-86-5	Pentachlorophenol	500	274	55	22-136
95-95-4	2,4,5-Trichlorophenol	500	358	72	48-113
88-06-2	2,4,6-Trichlorophenol	500	416	83	53-109
106-46-7	1,4-Dichlorobenzene	500	387	77	17-120
121-14-2	2,4-Dinitrotoluene	500	467	93	51-124
118-74-1	Hexachlorobenzene	500	430	86	55-118
87-68-3	Hexachlorobutadiene	500	346	69	15-108
67-72-1	Hexachloroethane	500	319	64	19-120
98-95-3	Nitrobenzene	500	284	57	49-116
110-86-1	Pyridine	500	161	32	14-76

CAS No.	Surrogate Recoveries	BSP	Limits
367-12-4	2-Fluorophenol	48%	12-69%
4165-62-2	Phenol-d5	34%	11-51%
118-79-6	2,4,6-Tribromophenol	71%	33-131%
4165-60-0	Nitrobenzene-d5	58%	40-117%
321-60-8	2-Fluorobiphenyl	73%	33-121%
1718-51-0	Terphenyl-d14	81%	35-142%

Blank Spike Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5559-BS	A14887.D	1	02/27/06	SC	02/27/06	OP5559	EA1064

The QC reported here applies to the following samples: Method: SW846 8270C

F38750-1

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
65-85-0	Benzoic acid	1670	719	43	34-106
95-57-8	2-Chlorophenol	1670	1100	66	55-107
59-50-7	4-Chloro-3-methyl phenol	1670	1000	60	56-116
120-83-2	2,4-Dichlorophenol	1670	1220	73	54-108
105-67-9	2,4-Dimethylphenol	1670	1000	60	38-108
51-28-5	2,4-Dinitrophenol	1670	877	53	21-137
534-52-1	4,6-Dinitro-o-cresol	1670	1080	65	51-126
95-48-7	2-Methylphenol	1670	1000	60	53-110
	3&4-Methylphenol	3330	1850	56	53-114
88-75-5	2-Nitrophenol	1670	1140	68	52-110
100-02-7	4-Nitrophenol	1670	729	44	41-116
87-86-5	Pentachlorophenol	1670	984	59	39-140
108-95-2	Phenol	1670	878	53	49-112
95-95-4	2,4,5-Trichlorophenol	1670	1090	65	55-119
88-06-2	2,4,6-Trichlorophenol	1670	1160	70	53-117
83-32-9	Acenaphthene	1670	1210	73	55-114
208-96-8	Acenaphthylene	1670	1340	80	64-122
120-12-7	Anthracene	1670	1330	80	57-120
56-55-3	Benzo(a)anthracene	1670	1320	79	60-115
50-32-8	Benzo(a)pyrene	1670	1350	81	56-122
205-99-2	Benzo(b)fluoranthene	1670	1230	74	58-120
191-24-2	Benzo(g,h,i)perylene	1670	1640	98	37-138
207-08-9	Benzo(k)fluoranthene	1670	1540	92	59-123
101-55-3	4-Bromophenyl phenyl ether	1670	1350	81	55-124
85-68-7	Butyl benzyl phthalate	1670	1370	82	60-122
100-51-6	Benzyl Alcohol	1670	992	60	47-114
91-58-7	2-Chloronaphthalene	1670	1130	68	42-124
106-47-8	4-Chloroaniline	1670	892	54	18-114
86-74-8	Carbazole	1670	1400	84	46-149
218-01-9	Chrysene	1670	1400	84	61-115
111-91-1	bis(2-Chloroethoxy)methane	1670	862	52	52-104
111-44-4	bis(2-Chloroethyl)ether	1670	888	53	47-109
108-60-1	bis(2-Chloroisopropyl)ether	1670	747	45	44-114
7005-72-3	4-Chlorophenyl phenyl ether	1670	1240	74	55-118
95-50-1	1,2-Dichlorobenzene	1670	1210	73	49-114
541-73-1	1,3-Dichlorobenzene	1670	1260	76	49-110

Blank Spike Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5559-BS	A14887.D	1	02/27/06	SC	02/27/06	OP5559	EA1064

The QC reported here applies to the following samples: Method: SW846 8270C

F38750-1

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
106-46-7	1,4-Dichlorobenzene	1670	1250	75	49-110
121-14-2	2,4-Dinitrotoluene	1670	1400	84	56-124
606-20-2	2,6-Dinitrotoluene	1670	1340	80	61-120
91-94-1	3,3'-Dichlorobenzidine	1670	2020	121	48-168
53-70-3	Dibenzo(a,h)anthracene	1670	1500	90	39-135
132-64-9	Dibenzofuran	1670	1250	75	55-118
84-74-2	Di-n-butyl phthalate	1670	1320	79	58-121
117-84-0	Di-n-octyl phthalate	1670	1250	75	47-134
84-66-2	Diethyl phthalate	1670	1370	82	58-123
131-11-3	Dimethyl phthalate	1670	1360	82	60-119
117-81-7	bis(2-Ethylhexyl)phthalate	1670	1360	82	54-124
206-44-0	Fluoranthene	1670	1450	87	58-123
86-73-7	Fluorene	1670	1240	74	53-118
118-74-1	Hexachlorobenzene	1670	1310	79	55-123
87-68-3	Hexachlorobutadiene	1670	1070	64	47-106
77-47-4	Hexachlorocyclopentadiene	1670	935	56	32-140
67-72-1	Hexachloroethane	1670	1140	68	51-117
193-39-5	Indeno(1,2,3-cd)pyrene	1670	1360	82	42-139
78-59-1	Isophorone	1670	944	57	56-112
91-57-6	2-Methylnaphthalene	1670	1050	63	48-110
88-74-4	2-Nitroaniline	1670	1040	62	52-126
99-09-2	3-Nitroaniline	1670	1870	112	45-138
100-01-6	4-Nitroaniline	1670	3150	189* [a]	63-170
91-20-3	Naphthalene	1670	1020	61	53-111
98-95-3	Nitrobenzene	1670	857	51	46-121
621-64-7	N-Nitroso-di-n-propylamine	1670	862	52	49-117
86-30-6	N-Nitrosodiphenylamine	1670	1590	95	55-162
85-01-8	Phenanthrene	1670	1290	77	58-120
129-00-0	Pyrene	1670	1400	84	53-121
120-82-1	1,2,4-Trichlorobenzene	1670	1210	73	54-110

CAS No.	Surrogate Recoveries	BSP	Limits
367-12-4	2-Fluorophenol	57%	26-124%
4165-62-2	Phenol-d5	55%	28-119%

9.2

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Blank Spike Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5559-BS	A14887.D	1	02/27/06	SC	02/27/06	OP5559	EA1064

The QC reported here applies to the following samples: Method: SW846 8270C

F38750-1

CAS No.	Surrogate Recoveries	BSP	Limits
118-79-6	2,4,6-Tribromophenol	63%	26-134%
4165-60-0	Nitrobenzene-d5	49%	27-117%
321-60-8	2-Fluorobiphenyl	61%	24-113%
1718-51-0	Terphenyl-d14	79%	37-147%

(a) Not detected in associated samples.

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5556-MS	A14884.D	1	02/27/06	SC	02/27/06	OP5556	EA1064
OP5556-MSD	A14885.D	1	02/27/06	SC	02/27/06	OP5556	EA1064
F38750-1A	A14883.D	1	02/27/06	SC	02/27/06	OP5556	EA1064

The QC reported here applies to the following samples: Method: SW846 8270C

F38750-1A

CAS No.	Compound	F38750-1A ug/l	Q	Spike ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
95-48-7	2-Methylphenol	ND		500	260	52	244	49	6	27-104/20
	3&4-Methylphenol	ND		1000	456	46	446	45	2	19-103/20
87-86-5	Pentachlorophenol	ND		500	294	59	293	59	0	30-141/18
95-95-4	2,4,5-Trichlorophenol	ND		500	311	62	318	64	2	37-127/20
88-06-2	2,4,6-Trichlorophenol	ND		500	351	70	341	68	3	48-119/20
106-46-7	1,4-Dichlorobenzene	ND		500	313	63	319	64	2	29-101/24
121-14-2	2,4-Dinitrotoluene	ND		500	415	83	429	86	3	38-141/20
118-74-1	Hexachlorobenzene	ND		500	397	79	429	86	8	41-125/15
87-68-3	Hexachlorobutadiene	ND		500	305	61	285	57	7	20-95/25
67-72-1	Hexachloroethane	ND		500	265	53	278	56	5	30-101/19
98-95-3	Nitrobenzene	ND		500	253	51	259	52	2	41-130/22
110-86-1	Pyridine	ND		500	136	27	165	33	19	17-83/23

CAS No.	Surrogate Recoveries	MS	MSD	F38750-1A	Limits
367-12-4	2-Fluorophenol	53%	43%	31%	12-69%
4165-62-2	Phenol-d5	36%	32%	18%	11-51%
118-79-6	2,4,6-Tribromophenol	76%	70%	41%	33-131%
4165-60-0	Nitrobenzene-d5	57%	53%	45%	40-117%
321-60-8	2-Fluorobiphenyl	69%	58%	52%	33-121%
1718-51-0	Terphenyl-d14	90%	76%	67%	35-142%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5559-MS	A14892.D	1	02/27/06	SC	02/27/06	OP5559	EA1064
OP5559-MSD	A14893.D	1	02/27/06	SC	02/27/06	OP5559	EA1064
F38750-1	A14888.D	1	02/27/06	SC	02/27/06	OP5559	EA1064

The QC reported here applies to the following samples: Method: SW846 8270C

F38750-1

CAS No.	Compound	F38750-1 ug/kg	Q	Spike ug/kg	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
65-85-0	Benzoic acid	ND		1850	791	43	797	43	1	12-60/24
95-57-8	2-Chlorophenol	ND		1850	1110	60	1120	61	1	38-112/25
59-50-7	4-Chloro-3-methyl phenol	ND		1850	1050	57	1080	58	3	53-117/27
120-83-2	2,4-Dichlorophenol	ND		1850	1170	63	1270	69	8	40-116/31
105-67-9	2,4-Dimethylphenol	ND		1850	1060	57	1050	57	1	31-127/24
51-28-5	2,4-Dinitrophenol	ND		1850	878	47	827	45	6	11-115/24
534-52-1	4,6-Dinitro-o-cresol	ND		1850	1010	55	903	49	11	30-125/22
95-48-7	2-Methylphenol	ND		1850	998	54	969	52	3	40-117/27
	3&4-Methylphenol	ND		3700	1940	52	1850	50	5	40-121/25
88-75-5	2-Nitrophenol	ND		1850	1160	63	1190	64	3	32-120/25
100-02-7	4-Nitrophenol	ND		1850	741	40	678	37	9	29-142/23
87-86-5	Pentachlorophenol	ND		1850	1030	56	1110	60	7	38-136/26
108-95-2	Phenol	ND		1850	905	49	841	45	7	36-117/22
95-95-4	2,4,5-Trichlorophenol	ND		1850	1080	58	1110	60	3	48-123/20
88-06-2	2,4,6-Trichlorophenol	ND		1850	1330	72	1220	66	9	45-125/21
83-32-9	Acenaphthene	ND		1850	1260	68	1180	64	7	48-114/18
208-96-8	Acenaphthylene	ND		1850	1500	81	1350	73	11	50-132/23
120-12-7	Anthracene	ND		1850	1350	73	1300	70	4	48-120/21
56-55-3	Benzo(a)anthracene	ND		1850	1490	80	1440	78	3	46-126/19
50-32-8	Benzo(a)pyrene	ND		1850	1580	85	1380	75	14	48-118/23
205-99-2	Benzo(b)fluoranthene	ND		1850	1500	81	1280	69	16	45-130/23
191-24-2	Benzo(g,h,i)perylene	ND		1850	2120	115	1810	98	16	26-119/30
207-08-9	Benzo(k)fluoranthene	ND		1850	1800	97	1610	87	11	50-126/29
101-55-3	4-Bromophenyl phenyl ether	ND		1850	1470	79	1350	73	9	44-127/23
85-68-7	Butyl benzyl phthalate	ND		1850	1470	79	1340	72	9	41-149/24
100-51-6	Benzyl Alcohol	ND		1850	1040	56	967	52	7	43-119/27
91-58-7	2-Chloronaphthalene	ND		1850	1180	64	1080	58	9	35-118/24
106-47-8	4-Chloroaniline	ND		1850	1180	64	1150	62	3	26-108/30
86-74-8	Carbazole	ND		1850	1530	83	1470	79	4	34-154/18
218-01-9	Chrysene	ND		1850	1540	83	1400	76	10	42-123/25
111-91-1	bis(2-Chloroethoxy)methane	ND		1850	916	49	850	46	7	45-102/26
111-44-4	bis(2-Chloroethyl)ether	ND		1850	872	47	871	47	0	37-108/28
108-60-1	bis(2-Chloroisopropyl)ether	ND		1850	677	37	674	36	0	34-113/26
7005-72-3	4-Chlorophenyl phenyl ether	ND		1850	1400	76	1290	70	8	43-123/22
95-50-1	1,2-Dichlorobenzene	ND		1850	1190	64	1170	63	2	25-119/28
541-73-1	1,3-Dichlorobenzene	ND		1850	1220	66	1190	64	2	23-112/26

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5559-MS	A14892.D	1	02/27/06	SC	02/27/06	OP5559	EA1064
OP5559-MSD	A14893.D	1	02/27/06	SC	02/27/06	OP5559	EA1064
F38750-1	A14888.D	1	02/27/06	SC	02/27/06	OP5559	EA1064

The QC reported here applies to the following samples: Method: SW846 8270C

F38750-1

CAS No.	Compound	F38750-1 ug/kg	Q	Spike ug/kg	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
106-46-7	1,4-Dichlorobenzene	ND		1850	1180	64	1150	62	3	28-111/27
121-14-2	2,4-Dinitrotoluene	ND		1850	1560	84	1390	75	12	52-127/27
606-20-2	2,6-Dinitrotoluene	ND		1850	1520	82	1440	78	5	52-121/25
91-94-1	3,3'-Dichlorobenzidine	ND		1850	2500	135	2220	120	12	28-148/28
53-70-3	Dibenzo(a,h)anthracene	ND		1850	1990	108	1810	98	9	24-128/25
132-64-9	Dibenzofuran	ND		1850	1290	70	1200	65	7	46-116/18
84-74-2	Di-n-butyl phthalate	ND		1850	1410	76	1330	72	6	44-124/22
117-84-0	Di-n-octyl phthalate	ND		1850	1290	70	1110	60	15	40-156/29
84-66-2	Diethyl phthalate	ND		1850	1550	84	1350	73	14	48-124/20
131-11-3	Dimethyl phthalate	ND		1850	1500	81	1310	71	14	55-118/15
117-81-7	bis(2-Ethylhexyl)phthalate	ND		1850	1380	75	1330	72	4	38-153/23
206-44-0	Fluoranthene	ND		1850	1480	80	1450	78	2	42-127/24
86-73-7	Fluorene	ND		1850	1360	73	1220	66	11	46-118/22
118-74-1	Hexachlorobenzene	ND		1850	1500	81	1330	72	12	55-114/24
87-68-3	Hexachlorobutadiene	ND		1850	1090	59	1020	55	7	23-105/25
77-47-4	Hexachlorocyclopentadiene	ND		1850	937	51	892	48	5	14-128/29
67-72-1	Hexachloroethane	ND		1850	1030	56	1040	56	1	22-114/25
193-39-5	Indeno(1,2,3-cd)pyrene	ND		1850	1690	91	1640	89	3	31-120/30
78-59-1	Isophorone	ND		1850	935	51	935	51	0	44-116/23
91-57-6	2-Methylnaphthalene	ND		1850	1040	56	1060	57	2	32-113/26
88-74-4	2-Nitroaniline	ND		1850	1040	56	982	53	6	47-134/23
99-09-2	3-Nitroaniline	ND		1850	2100	113	2050	111	2	47-134/21
100-01-6	4-Nitroaniline	ND		1850	3540	191*	3100	167	13	52-185/30
91-20-3	Naphthalene	ND		1850	1000	54	1010	55	1	23-126/26
98-95-3	Nitrobenzene	ND		1850	870	47	913	49	5	36-116/27
621-64-7	N-Nitroso-di-n-propylamine	ND		1850	893	48	838	45	6	40-122/25
86-30-6	N-Nitrosodiphenylamine	ND		1850	1760	95	1560	84	12	49-165/21
85-01-8	Phenanthrene	ND		1850	1400	76	1290	70	8	42-130/18
129-00-0	Pyrene	ND		1850	1600	86	1370	74	15	37-145/24
120-82-1	1,2,4-Trichlorobenzene	ND		1850	1210	65	1200	65	1	31-116/27

CAS No.	Surrogate Recoveries	MS	MSD	F38750-1	Limits
367-12-4	2-Fluorophenol	49%	46%	46%	26-124%
4165-62-2	Phenol-d5	49%	46%	46%	28-119%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5559-MS	A14892.D	1	02/27/06	SC	02/27/06	OP5559	EA1064
OP5559-MSD	A14893.D	1	02/27/06	SC	02/27/06	OP5559	EA1064
F38750-1	A14888.D	1	02/27/06	SC	02/27/06	OP5559	EA1064

The QC reported here applies to the following samples: Method: SW846 8270C

F38750-1

CAS No.	Surrogate Recoveries	MS	MSD	F38750-1	Limits
118-79-6	2,4,6-Tribromophenol	63%	60%	42%	26-134%
4165-60-0	Nitrobenzene-d5	42%	45%	41%	27-117%
321-60-8	2-Fluorobiphenyl	58%	55%	51%	24-113%
1718-51-0	Terphenyl-d14	78%	67%	59%	37-147%

9.3

9

GC Semi-volatiles

QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Method Blank Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5558-MB	DD54796.D	1	02/28/06	RC	02/27/06	OP5558	GDD986

The QC reported here applies to the following samples: Method: SW846 8151

F38750-1A

CAS No.	Compound	Result	RL	MDL	Units	Q
94-75-7	2,4-D	ND	10	5.0	ug/l	
93-72-1	2,4,5-TP (Silvex)	ND	2.0	1.5	ug/l	
93-76-5	2,4,5-T	ND	2.0	1.5	ug/l	

CAS No.	Surrogate Recoveries		Limits
19719-28-9	2,4-DCAA	129%	23-171%

10.1

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Method Blank Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5563-MB	GG26142.D	1	02/28/06	FO	02/28/06	OP5563	GGG825

The QC reported here applies to the following samples: Method: SW846 8081A

F38750-1

CAS No.	Compound	Result	RL	MDL	Units	Q
309-00-2	Aldrin	ND	1.7	0.40	ug/kg	
319-84-6	alpha-BHC	ND	1.7	0.36	ug/kg	
319-85-7	beta-BHC	ND	1.7	0.53	ug/kg	
319-86-8	delta-BHC	ND	1.7	0.53	ug/kg	
58-89-9	gamma-BHC (Lindane)	ND	1.7	0.73	ug/kg	
5103-71-9	alpha-Chlordane	ND	1.7	0.33	ug/kg	
5103-74-2	gamma-Chlordane	ND	1.7	0.33	ug/kg	
60-57-1	Dieldrin	ND	3.3	0.89	ug/kg	
72-54-8	4,4'-DDD	ND	3.3	0.96	ug/kg	
72-55-9	4,4'-DDE	ND	3.3	1.3	ug/kg	
50-29-3	4,4'-DDT	ND	3.3	1.5	ug/kg	
72-20-8	Endrin	ND	3.3	1.1	ug/kg	
1031-07-8	Endosulfan sulfate	ND	3.3	0.96	ug/kg	
7421-93-4	Endrin aldehyde	ND	3.3	1.4	ug/kg	
53494-70-5	Endrin ketone	ND	3.3	0.89	ug/kg	
959-98-8	Endosulfan-I	ND	3.3	0.46	ug/kg	
33213-65-9	Endosulfan-II	ND	3.3	0.83	ug/kg	
76-44-8	Heptachlor	ND	1.7	0.46	ug/kg	
1024-57-3	Heptachlor epoxide	ND	1.7	0.33	ug/kg	
72-43-5	Methoxychlor	ND	17	7.2	ug/kg	
8001-35-2	Toxaphene	ND	17	12	ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	86%	36-134%
2051-24-3	Decachlorobiphenyl	103%	33-145%

10.1 10

Method Blank Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5561-MB	GG26147.D	1	02/28/06	FO	02/28/06	OP5561	GGG825

The QC reported here applies to the following samples: Method: SW846 8081A

F38750-1A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.25	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.50	ug/l	
76-44-8	Heptachlor	ND	0.50	0.25	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.25	ug/l	
72-43-5	Methoxychlor	ND	5.0	2.5	ug/l	
8001-35-2	Toxaphene	ND	5.0	2.5	ug/l	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	89%	18-110%
2051-24-3	Decachlorobiphenyl	72%	24-125%

Method Blank Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5555-MB	DD54865.D	1	03/02/06	RC	02/27/06	OP5555	GDD988

The QC reported here applies to the following samples: Method: SW846 8082

F38750-1

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	2.0	ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	43%	27-143%
2051-24-3	Decachlorobiphenyl	46%	19-143%

10.1

10

Method Blank Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5562-MB	CC11465.D	1	02/28/06	RC	02/28/06	OP5562	GCC533

The QC reported here applies to the following samples: Method: SW846 8015 M

F38750-1

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.2	3.3	mg/kg	

CAS No.	Surrogate Recoveries		Limits
84-15-1	o-Terphenyl	73%	41-153%

10.1 10

Blank Spike Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5558-BS	DD54797.D	1	02/28/06	RC	02/27/06	OP5558	GDD986

The QC reported here applies to the following samples: Method: SW846 8151

F38750-1A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
94-75-7	2,4-D	20	19.1	96	44-152
93-72-1	2,4,5-TP (Silvex)	4	3.7	93	41-142
93-76-5	2,4,5-T	4	5.1	128	44-147

CAS No.	Surrogate Recoveries	BSP	Limits
19719-28-9	2,4-DCAA	135%	23-171%

10.2 10

Blank Spike Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5563-BS	GG26143.D	1	02/28/06	FO	02/28/06	OP5563	GGG825

The QC reported here applies to the following samples: Method: SW846 8081A

F38750-1

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
309-00-2	Aldrin	8.29	7.0	84	39-144
319-84-6	alpha-BHC	8.29	7.6	92	61-135
319-85-7	beta-BHC	8.29	7.3	88	62-134
319-86-8	delta-BHC	8.29	7.5	90	52-145
58-89-9	gamma-BHC (Lindane)	8.29	7.1	86	56-129
5103-71-9	alpha-Chlordane	8.29	6.7	81	64-129
5103-74-2	gamma-Chlordane	8.29	6.7	81	54-130
60-57-1	Dieldrin	16.6	14.8	89	73-128
72-54-8	4,4'-DDD	16.6	16.7	101	58-144
72-55-9	4,4'-DDE	16.6	15.5	93	66-144
50-29-3	4,4'-DDT	16.6	15.7	95	58-140
72-20-8	Endrin	16.6	16.6	100	64-152
1031-07-8	Endosulfan sulfate	16.6	15.2	92	62-125
7421-93-4	Endrin aldehyde	16.6	13.4	81	49-107
53494-70-5	Endrin ketone	16.6	13.8	83	66-129
959-98-8	Endosulfan-I	8.29	7.0	84	60-131
33213-65-9	Endosulfan-II	16.6	15.7	95	76-125
76-44-8	Heptachlor	8.29	7.5	90	65-133
1024-57-3	Heptachlor epoxide	8.29	7.1	86	67-123
72-43-5	Methoxychlor	82.9	76.6	92	64-134

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	83%	36-134%
2051-24-3	Decachlorobiphenyl	98%	33-145%

10.2 10

Blank Spike Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5561-BS	GG26148.D	1	02/28/06	FO	02/28/06	OP5561	GGG825

The QC reported here applies to the following samples: Method: SW846 8081A

F38750-1A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	2.5	2.4	96	62-121
72-20-8	Endrin	5	5.4	108	74-126
76-44-8	Heptachlor	2.5	2.4	96	35-118
1024-57-3	Heptachlor epoxide	2.5	2.4	96	51-129
72-43-5	Methoxychlor	25	25.6	102	66-135

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	86%	18-110%
2051-24-3	Decachlorobiphenyl	67%	24-125%

10.2 10

Blank Spike Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5555-BS	DD54866.D	1	03/02/06	RC	02/27/06	OP5555	GDD988

The QC reported here applies to the following samples: Method: SW846 8082

F38750-1

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
12674-11-2	Aroclor 1016	66.6	72.1	108	60-156
11096-82-5	Aroclor 1260	66.6	80.5	121	55-164

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	80%	27-143%
2051-24-3	Decachlorobiphenyl	92%	19-143%

10.2 10

Blank Spike Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5562-BS	CC11466.D	1	02/28/06	RC	02/28/06	OP5562	GCC533

The QC reported here applies to the following samples: Method: SW846 8015 M

F38750-1

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	32.8	26.6	81	55-131

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	77%	41-153%

10.2 10

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5558-MS	DD54798.D	1	02/28/06	RC	02/27/06	OP5558	GDD986
OP5558-MSD	DD54799.D	1	02/28/06	RC	02/27/06	OP5558	GDD986
F38723-1A	DD54801.D	1	02/28/06	RC	02/27/06	OP5558	GDD986

The QC reported here applies to the following samples: Method: SW846 8151

F38750-1A

CAS No.	Compound	F38723-1A ug/l	Q	Spike ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
94-75-7	2,4-D	ND		20	28.3	142	20.4	102	32*	28-144/25
93-72-1	2,4,5-TP (Silvex)	ND		4	5.5	138*	4.0	100	32*	25-137/24
93-76-5	2,4,5-T	ND		4	5.4	135	4.1	103	27	37-149/29

CAS No.	Surrogate Recoveries	MS	MSD	F38723-1A	Limits
19719-28-9	2,4-DCAA	238%* [a]	148%	158%	23-171%

(a) Outside control limits due to matrix interference.

10.3 10

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5563-MS	GG26144.D	1	02/28/06	FO	02/28/06	OP5563	GGG825
OP5563-MSD	GG26145.D	1	02/28/06	FO	02/28/06	OP5563	GGG825
F38750-1	GG26146.D	1	02/28/06	FO	02/28/06	OP5563	GGG825

The QC reported here applies to the following samples: Method: SW846 8081A

F38750-1

CAS No.	Compound	F38750-1 ug/kg	Q	Spike ug/kg	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
309-00-2	Aldrin	ND		8.99	8.3	92	8.3	92	0	36-133/24
319-84-6	alpha-BHC	ND		8.99	9.6	107	9.8	108	2	39-129/24
319-85-7	beta-BHC	ND		8.99	8.6	96	8.7	96	1	41-125/20
319-86-8	delta-BHC	ND		8.99	9.1	101	9.1	101	0	27-124/26
58-89-9	gamma-BHC (Lindane)	ND		8.99	8.5	95	8.6	95	1	43-124/22
5103-71-9	alpha-Chlordane	ND		8.99	8.0	89	7.9	87	1	40-123/23
5103-74-2	gamma-Chlordane	ND		8.99	8.1	90	8.0	88	1	44-119/24
60-57-1	Dieldrin	ND		18	17.5	97	17.5	97	0	48-124/20
72-54-8	4,4'-DDD	ND		18	19.9	111	19.9	110	0	47-133/19
72-55-9	4,4'-DDE	ND		18	18.4	102	18.3	101	1	48-124/21
50-29-3	4,4'-DDT	ND		18	18.8	105	18.7	103	1	42-136/23
72-20-8	Endrin	ND		18	19.9	111	19.6	108	2	41-147/22
1031-07-8	Endosulfan sulfate	ND		18	18.3	102	17.2	95	6	40-130/22
7421-93-4	Endrin aldehyde	ND		18	16.4	91	15.9	88	3	24-140/26
53494-70-5	Endrin ketone	ND		18	16.5	92	16.3	90	1	42-128/21
959-98-8	Endosulfan-I	ND		8.99	8.3	92	8.2	91	1	40-130/19
33213-65-9	Endosulfan-II	ND		18	18.4	102	18.1	100	2	35-126/21
76-44-8	Heptachlor	ND		8.99	8.9	99	8.9	98	0	32-146/19
1024-57-3	Heptachlor epoxide	ND		8.99	8.5	95	8.4	93	1	37-132/21
72-43-5	Methoxychlor	ND		89.9	90.8	101	89.6	99	1	50-143/21

CAS No.	Surrogate Recoveries	MS	MSD	F38750-1	Limits
877-09-8	Tetrachloro-m-xylene	90%	90%	88%	36-134%
2051-24-3	Decachlorobiphenyl	105%	105%	105%	33-145%

10.3 10

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5561-MS	GG26149.D	1	02/28/06	FO	02/28/06	OP5561	GGG825
OP5561-MSD	GG26150.D	1	02/28/06	FO	02/28/06	OP5561	GGG825
F38750-1A	GG26151.D	1	02/28/06	FO	02/28/06	OP5561	GGG825

The QC reported here applies to the following samples: Method: SW846 8081A

F38750-1A

CAS No.	Compound	F38750-1A ug/l	Q	Spike ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
58-89-9	gamma-BHC (Lindane)	ND		2.5	3.0	120	2.8	112	7	44-125/17
72-20-8	Endrin	ND		5	6.7	134	6.3	126	6	49-143/16
76-44-8	Heptachlor	ND		2.5	3.0	120	2.8	112	7	31-121/14
1024-57-3	Heptachlor epoxide	ND		2.5	2.9	116	2.8	112	4	33-134/22
72-43-5	Methoxychlor	ND		25	30.0	120	28.7	115	4	64-141/15

CAS No.	Surrogate Recoveries	MS	MSD	F38750-1A	Limits
877-09-8	Tetrachloro-m-xylene	103%	97%	91% [a]	18-110%
2051-24-3	Decachlorobiphenyl	109%	104%	97.5% [a]	24-125%

(a) Surrogate were adjusted due to double spiking.

10.3 10

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F38750
Account: ALSE Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP5562-MS	CC11468.D	1	02/28/06	RC	02/28/06	OP5562	GCC533
OP5562-MSD	CC11469.D	1	02/28/06	RC	02/28/06	OP5562	GCC533
F38750-1	CC11467.D	1	02/28/06	RC	02/28/06	OP5562	GCC533

The QC reported here applies to the following samples: Method: SW846 8015 M

F38750-1

CAS No.	Compound	F38750-1 mg/kg	Q	Spike mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	ND		37	30.0	81	34.6	95	14	49-139/24

CAS No.	Surrogate Recoveries	MS	MSD	F38750-1	Limits
84-15-1	o-Terphenyl	71%	77%	73%	41-153%

10.3 10

Metals Analysis

QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY
Part 2 - Method Blanks

Login Number: F38750
Account: ALSE - Accutest Labs S. E.
Project: ITVAVAB: Indian Head

QC Batch ID: MP4491
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: mg/l

Prep Date: 03/02/06

Metal	RL	IDL	MB raw	final
Aluminum	0.20	.0042		
Antimony	0.20	.0026		
Arsenic	0.50	.0018	0.0046	<0.50
Barium	1.0	.0003	0.030	<1.0
Beryllium	0.0050	.0001		
Boron	0.10	.0009		
Cadmium	0.0050	.0002	0.000040	<0.0050
Calcium	5.0	.024		
Chromium	0.010	.0008	0.00071	<0.010
Cobalt	0.050	.0004		
Copper	0.025	.0027		
Iron	0.10	.012		
Lead	0.50	.0014	0.35	<0.50
Magnesium	5.0	.003		
Manganese	0.015	.0012		
Molybdenum	0.0050	.0008		
Nickel	0.040	.0006		
Potassium	5.0			
Selenium	0.50	.0015	0.0035	<0.50
Silver	0.010	.0004	-0.000080	<0.010
Sodium	5.0	.14		
Strontium	0.010			
Thallium	0.20	.0033		
Tin	0.010			
Titanium	0.010	.0038		
Vanadium	0.050	.0005		
Zinc	0.020	.0021		

Associated samples MP4491: F38750-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

11.1.1

11

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F38750
Account: ALSE - Accutest Labs S. E.
Project: ITVAVAB: Indian Head

QC Batch ID: MP4491
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: mg/l

Prep Date:			03/02/06					03/02/06	
Metal	F38750-1A Original	DUP	RPD	QC Limits	F38750-1A Original	MS	Spikelot MPITCLP1	% Rec	QC Limits
Aluminum									
Antimony									
Arsenic	0.0072	0.0069	4.3	0-20	0.0072	2.1	2.0	104.6	75-125
Barium	0.18	0.18	0.0	0-20	0.18	10.6	10.0	104.2	75-125
Beryllium									
Boron									
Cadmium	0.0	0.0	NC	0-20	0.0	0.051	0.050	102.0	75-125
Calcium									
Chromium	0.0	0.0	NC	0-20	0.0	0.22	0.20	110.0	75-125
Cobalt									
Copper									
Iron									
Lead	0.025	0.025	0.0	0-20	0.025	2.2	2.0	108.8	75-125
Magnesium									
Manganese									
Molybdenum									
Nickel									
Potassium									
Selenium	0.0056	0.0062	10.2	0-20	0.0056	2.1	2.0	104.7	75-125
Silver	0.0	0.0	NC	0-20	0.0	0.055	0.050	110.0	75-125
Sodium									
Strontium									
Thallium									
Tin									
Titanium									
Vanadium									
Zinc									

Associated samples MP4491: F38750-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(N) Matrix Spike Rec. outside of QC limits
(anr) Analyte not requested

11.1.2 11

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F38750
Account: ALSE - Accutest Labs S. E.
Project: ITVAVAB: Indian Head

QC Batch ID: MP4491
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: mg/l

Prep Date: 03/02/06

Metal	F38750-1A Original	MSD	Spikelot MPITCLP1	% Rec	MSD RPD	QC Limit
Aluminum						
Antimony						
Arsenic	0.0072	2.1	2.0	104.6	0.0	
Barium	0.18	10.5	10.0	103.2	0.9	
Beryllium						
Boron						
Cadmium	0.0	0.050	0.050	100.0	2.0	
Calcium						
Chromium	0.0	0.22	0.20	110.0	0.0	
Cobalt						
Copper						
Iron						
Lead	0.025	2.2	2.0	108.8	0.0	
Magnesium						
Manganese						
Molybdenum						
Nickel						
Potassium						
Selenium	0.0056	2.1	2.0	104.7	0.0	
Silver	0.0	0.054	0.050	108.0	1.8	
Sodium						
Strontium						
Thallium						
Tin						
Titanium						
Vanadium						
Zinc						

Associated samples MP4491: F38750-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(N) Matrix Spike Rec. outside of QC limits
(anr) Analyte not requested

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F38750
Account: ALSE - Accutest Labs S. E.
Project: ITVAVAB: Indian Head

QC Batch ID: MP4491
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: mg/l

Prep Date: 03/02/06

Metal	BSP Result	Spikelot MPITCLP1	% Rec	QC Limits
Aluminum				
Antimony				
Arsenic	20.9	20.0	104.5	80-120
Barium	104	100.	104.0	80-120
Beryllium				
Boron				
Cadmium	0.51	0.50	102.0	80-120
Calcium				
Chromium	2.2	2.0	110.0	80-120
Cobalt				
Copper				
Iron				
Lead	23.9	20.0	119.5	80-120
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	20.6	20.0	103.0	80-120
Silver	0.54	0.50	108.0	80-120
Sodium				
Strontium				
Thallium				
Tin				
Titanium				
Vanadium				
Zinc				

Associated samples MP4491: F38750-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

11.1.3

11

SERIAL DILUTION RESULTS SUMMARY

Login Number: F38750
Account: ALSE - Accutest Labs S. E.
Project: ITVAVAB: Indian Head

QC Batch ID: MP4491
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: ug/l

Prep Date: 03/02/06

Metal	F38750-1A Original	SDL 1:5	RPD	QC Limits
Aluminum				
Antimony				
Arsenic	7.24	0.00	100.0(a)	0-10
Barium	183	180	1.2	0-10
Beryllium				
Boron				
Cadmium	0.00	0.00	NC	0-10
Calcium				
Chromium	0.00	0.00	NC	0-10
Cobalt				
Copper				
Iron				
Lead	25.3	21.9	13.5 (a)	0-10
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	5.56	0.00	100.0(a)	0-10
Silver	0.00	0.00	NC	0-10
Sodium				
Strontium				
Thallium				
Tin				
Titanium				
Vanadium				
Zinc				

Associated samples MP4491: F38750-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested
(a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

BLANK RESULTS SUMMARY
Part 2 - Method Blanks

Login Number: F38750
Account: ALSE - Accutest Labs S. E.
Project: ITVAVAB: Indian Head

QC Batch ID: MP4492
Matrix Type: LEACHATE

Methods: SW846 7470A
Units: mg/l

Prep Date: 03/01/06

Metal	RL	IDL	MB raw	final
Mercury	0.0020	.00037	-0.00058	<0.0020

Associated samples MP4492: F38750-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

11.2.1

11

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F38750
Account: ALSE - Accutest Labs S. E.
Project: ITVAVAB: Indian Head

QC Batch ID: MP4492
Matrix Type: LEACHATE

Methods: SW846 7470A
Units: mg/l

Prep Date: 03/01/06 03/01/06

Metal	F38750-1A Original	DUP	RPD	QC Limits	F38750-1A Original	MS	Spikelot HGTXAQ40	% Rec	QC Limits
Mercury	0.0	0.00072	200.0(a)	0-20	0.0	0.031	0.032	96.9	75-125

Associated samples MP4492: F38750-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(N) Matrix Spike Rec. outside of QC limits
(anr) Analyte not requested
(a) RPD acceptable due to low duplicate and sample concentrations.

11.2.2 11

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F38750
Account: ALSE - Accutest Labs S. E.
Project: ITVAVAB: Indian Head

QC Batch ID: MP4492
Matrix Type: LEACHATE

Methods: SW846 7470A
Units: mg/l

Prep Date: 03/01/06

Metal	F38750-1A Original	MSD	Spikelot HGTXAQ40	% Rec	MSD RPD	QC Limit
Mercury	0.0	0.031	0.032	96.9	0.0	

Associated samples MP4492: F38750-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(N) Matrix Spike Rec. outside of QC limits
(anr) Analyte not requested

11.2.2

11

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F38750
Account: ALSE - Accutest Labs S. E.
Project: ITVAVAB: Indian Head

QC Batch ID: MP4492
Matrix Type: LEACHATE

Methods: SW846 7470A
Units: mg/l

Prep Date: 03/01/06

Metal	BSP Result	Spikelot HGTXAQ40	% Rec	QC Limits
Mercury	0.029	0.032	90.6	80-120

Associated samples MP4492: F38750-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

11.2.3

11

General Chemistry

QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

Includes the following where applicable:

- Method Blank and Blank Spike Summaries
- Duplicate Summaries
- Matrix Spike Summaries

METHOD BLANK AND SPIKE RESULTS SUMMARY
GENERAL CHEMISTRY

Login Number: F38750
Account: ALSE - Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Analyte	Batch ID	RL	MB Result	Units	Spike Amount	BSP Result	BSP %Recov	QC Limits
Cyanide Reactivity	GP3741/GN9539	0.40	<0.40	mg/kg				
Sulfide Reactivity	GP3742/GN9540	8.0	<8.0	mg/kg				

Associated Samples:
Batch GP3741: F38750-1
Batch GP3742: F38750-1

12.1
12

DUPLICATE RESULTS SUMMARY
GENERAL CHEMISTRY

Login Number: F38750
Account: ALSE - Accutest Labs S. E.
Project: ITVAVAB: Indian Head

Analyte	Batch ID	QC Sample	Units	Original Result	DUP Result	RPD	QC Limits
Cyanide Reactivity	GP3741/GN9539	F38750-1	mg/kg	<0.40	<0.40	0.0	0-20%
Sulfide Reactivity	GP3742/GN9540	F38750-1	mg/kg	<9.0	<9.0	0.0	0-20%

Associated Samples:
Batch GP3741: F38750-1
Batch GP3742: F38750-1

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April 13, 2006

Project No. 2006-057-02

Ms. Patty Gamble
Shaw E&I, Inc.
200 Innovation Blvd., Suite 256
State College, PA 16801

Transmittal
Laboratory Test Results
Olsen Road LF 115273

Please find attached the laboratory test results for the above referenced project. The tests were outlined on the Project Verification Form that was faxed to your firm prior to the testing. The testing was performed in general accordance with the methods listed on the enclosed data sheets. The test results are believed to be representative of the samples that were submitted for testing and are indicative only of the specimens which were evaluated. We have no direct knowledge of the origin of the samples and imply no position with regard to the nature of the test results, i.e. pass/fail and no claims as to the suitability of the material for its intended use.

The test data and all associated project information provided shall be held in strict confidence and disclosed to other parties only with authorization by our Client. The test data submitted herein is considered integral with this report and is not to be reproduced except in whole and only with the authorization of the Client and Geotechnics. The remaining sample materials for this project will be retained for a minimum of 90 days as directed by the Geotechnics' Quality Program.

We are pleased to provide these testing services. Should you have any questions or if we may be of further assistance, please contact our office.

Respectively submitted,
Geotechnics, Inc.

David R. Backstrom
Laboratory Director

We understand that you have a choice in your laboratory services and we thank you for choosing Geotechnics.

DCN: Data Transmittal Letter Date: 1/28/05 Rev.: 1

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MOISTURE CONTENT

ASTM D 2216 (SOP-S1)

Client	SHAW E&I
Client Reference	NAVY / OLSEN RD. LF 115273
Project No.	2006-057-02

Lab ID	01
Boring No.	SELECT FILL
Depth (ft)	STINNETTS
Sample No.	2/17/06
Tare Number	890
Wt. of Tare & WS (gm)	449.06
Wt. of Tare & DS (gm)	411.13
Wt. of Tare (gm)	109.91
Wt. of Water (gm)	37.93
Wt. of DS (gm)	301.22
Water Content (%)	**12.6**

Notes : *NA*

Tested By *JP* *Date* *2/20/06* *Checked By* *KB* *Date* 2-21-06

page 1 of 1 DCN: CT-S1 DATE 6-30-98 REVISION: 2 *C:\MSOFFICE\Excel\PrintQ\[U163.xls]Sheet1*

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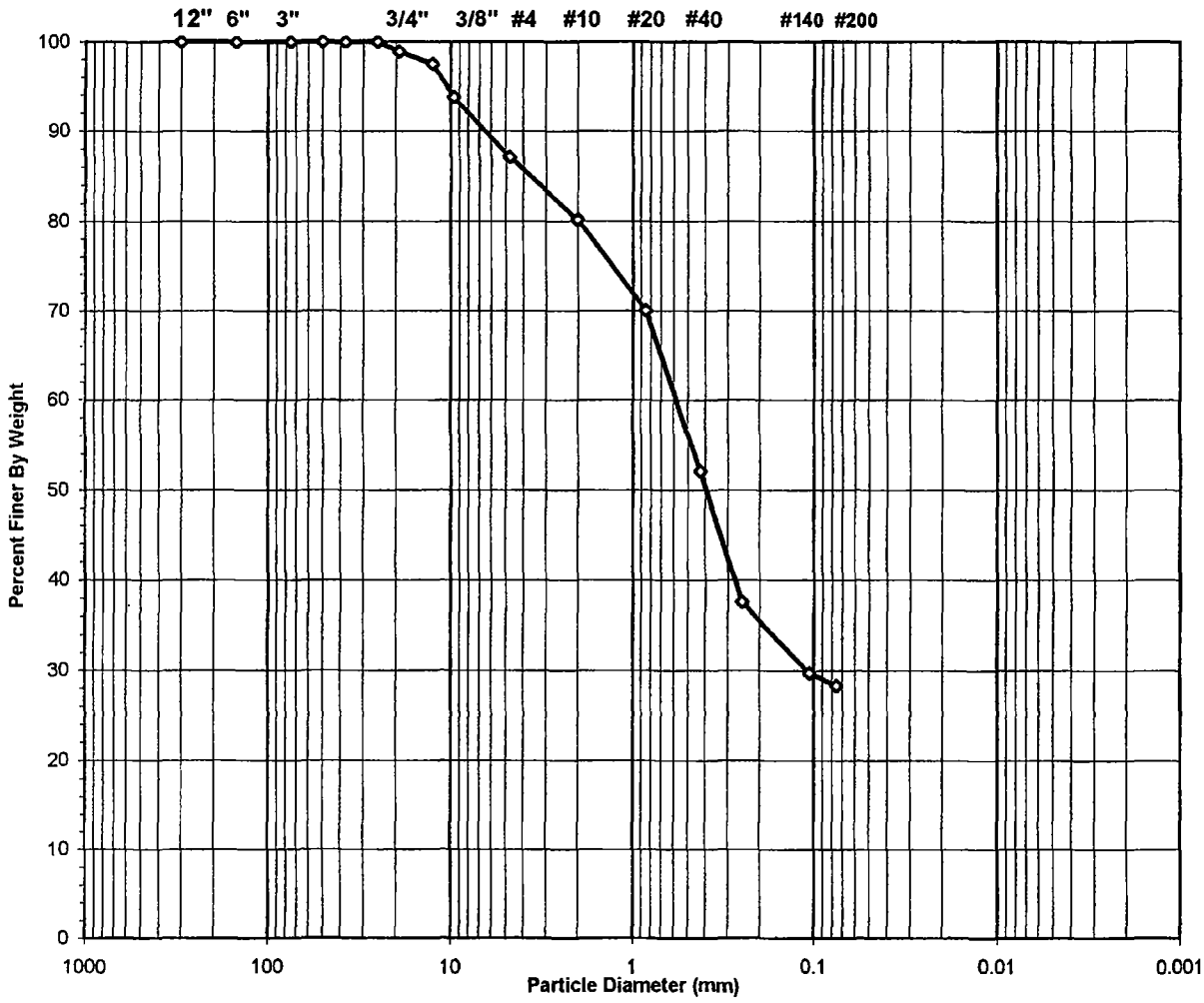
SIEVE ANALYSIS
ASTM D 422-63/AASHTO T88-00 (SOP-S3)

Client	SHAW E&I	Boring No.	SELECT FILL
Client Reference	Navy / Olsen Road LF 115273	Depth (ft)	STINNETTS
Project No.	2006-057-02	Sample No.	2/17/06
Lab ID	2006-057-02-01	Soil Color	**REDDISH BROWN**

	SIEVE ANALYSIS		*HYDROMETER*
USCS	**gravel**	**sand**	**silt and clay**



USCS Symbol ***SC, TESTED***

USCS Classification ***CLAYEY SAND***

Tested By PC Date 2/22/06 Checked By KLB Date 2-23-06

DCN: CT-S3A DATE 6-26-98 REVISION 2
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WASH SIEVE ANALYSIS

ASTM D 422-63/AASHTO T88-00 (SOP-S3)

Client	SHAW E&I	Boring No.	SELECT FILL
Client Reference	Navy / Olsen Road LF 115273	Depth (ft)	STINNETTS
Project No.	2006-057-02	Sample No.	2/17/06
Lab ID	2006-057-02-01	Soil Color	**REDDISH BROWN**

Moisture Content of Passing 3/4" Material		Water Content of Retained 3/4" Material	
Tare No.	920	Tare No.	553
Wgt.Tare + Wet Specimen (gm)	979.00	Wgt.Tare + Wet Specimen (gm)	167.80
Wgt.Tare + Dry Specimen (gm)	883.40	Wgt.Tare + Dry Specimen (gm)	166.64
Weight of Tare (gm)	103.05	Weight of Tare (gm)	84.32
Weight of Water (gm)	95.60	Weight of Water (gm)	1.16
Weight of Dry Soil (gm)	780.35	Weight of Dry Soil (gm)	82.32
Moisture Content (%)	**12.3**	**Moisture Content (%)**	**1.4**

Wet Weight -3/4" Sample (gm)	8107	Weight of the Dry Specimen (gm)	780.35
Dry Weight - 3/4" Sample (gm)	7222.2	Weight of minus #200 material (gm)	223.78
Wet Weight +3/4" Sample (gm)	83.77	Weight of plus #200 material (gm)	556.57
Dry Weight + 3/4" Sample (gm)	82.61		
Total Dry Weight Sample (gm)	7304.8	**J - Factor (Percent Finer than 3/4")**	**0.9887**

Sieve Size	Sieve Opening (mm)	Wgt.of Soil Retained (gm)		Percent Retained (%)	Accumulated Percent Retained (%)	Percent Finer (%)	**Accumulated Percent Finer (%)**
12"	300	0.00		0.00	0.00	100.00	**100.00**
6"	150	0.00		0.00	0.00	100.00	**100.00**
3"	75	0.00		0.00	0.00	100.00	**100.00**
2"	50	0.00	(*)	0.00	0.00	100.00	**100.00**
1 1/2"	37.5	0.00		0.00	0.00	100.00	**100.00**
1"	25	0.00		0.00	0.00	100.00	**100.00**
3/4"	19	83.77		1.13	1.13	98.87	**98.87**
1/2"	12.5	10.77		1.38	1.38	98.62	**97.50**
3/8"	9.5	29.68		3.80	5.18	94.82	**93.74**
#4	4.75	51.84		6.64	11.83	88.17	**87.18**
#10	2	55.14		7.07	18.89	81.11	**80.19**
#20	0.85	79.95	(**)	10.25	29.14	70.86	**70.06**
#40	0.425	141.65		18.15	47.29	52.71	**52.11**
#60	0.25	114.78		14.71	62.00	38.00	**37.57**
#140	0.106	61.97		7.94	69.94	30.06	**29.72**
#200	0.075	10.79		1.38	71.32	28.68	**28.35**
Pan	-	223.78		28.68	100.00	-	-

Notes : *(*) The + 3/4" sieve analysis is based on the Total Dry Weight of the Sample*
*(**) The - 3/4" sieve analysis is based on the Weight of the Dry Specimen*

Tested By PC Date 2/22/06 Checked By YMB Date 2-23-06

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ATTERBERG LIMITS

ASTM D 4318-98 / AASHTO T89 (SOP - S4A)

Client	SHAW E&I	Boring No.	SELECT FILL
Client Reference	Navy / Olsen Road LF 115273	Depth (ft)	STINNETTS
Project No.	2006-057-02	Sample No.	2/17/06
Lab ID	2006-057-02-01	Soil Description	**REDDISH BROWN LEAN CLAY**

***Note:** The USCS symbol used with this test refers only to the minus No. 40 sieve material. See the "Sieve and Hydrometer Analysis" graph page for the complete material description.*

(Minus No. 40 sieve material, Airdried)

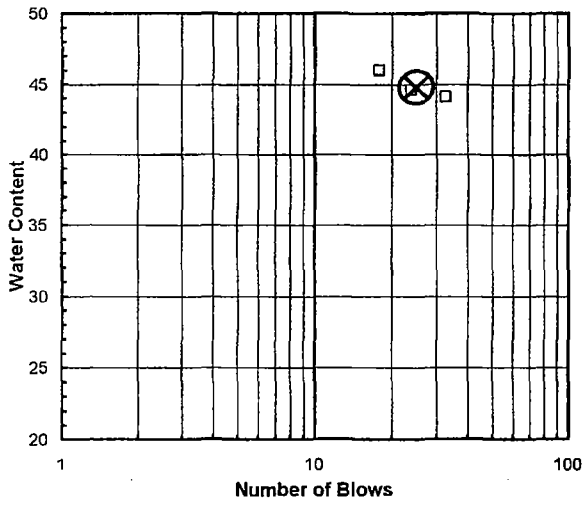
Liquid Limit Test	1	2	3	
Tare Number	12	33	35	MULTIPOINT
Wt. of Tare & WS (gm)	37.93	39.95	37.91	
Wt. of Tare & DS (gm)	31.05	33.01	30.27	
Wt. of Tare (gm)	15.46	17.45	13.68	
Wt. of Water (gm)	6.9	6.9	7.6	
Wt. of DS (gm)	15.6	15.6	16.6	
Moisture Content (%)	**44.1**	**44.6**	**46.1**	
Number of Blows	**33**	**24**	**18**	

Plastic Limit Test	1	2	Range
Tare Number	40	42	
Wt. of Tare & WS (gm)	22.17	22.88	
Wt. of Tare & DS (gm)	20.89	21.44	
Wt. of Tare (gm)	15.55	15.47	
Wt. of Water (gm)	1.3	1.4	
Wt. of DS (gm)	5.3	6.0	
Moisture Content (%)	**24.0**	**24.1**	**-0.2**

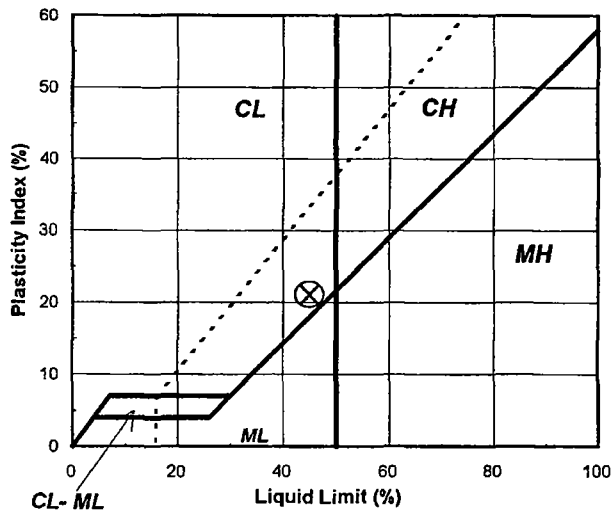
Note: The acceptable range of the two Moisture contents is ± 2.6

Test Results	
Liquid Limit (%)	**45**
Plastic Limit (%)	**24**
Plasticity Index (%)	**21**
USCS Symbol	**CL**

Flow Curve



Plasticity Chart



Tested By BS *Date* 2/22/06 *Checked By* KB *Date* 2-23-06

page 1 of 1 DCN: CT-S4B DATE: 10/8/01 REVISION: 2

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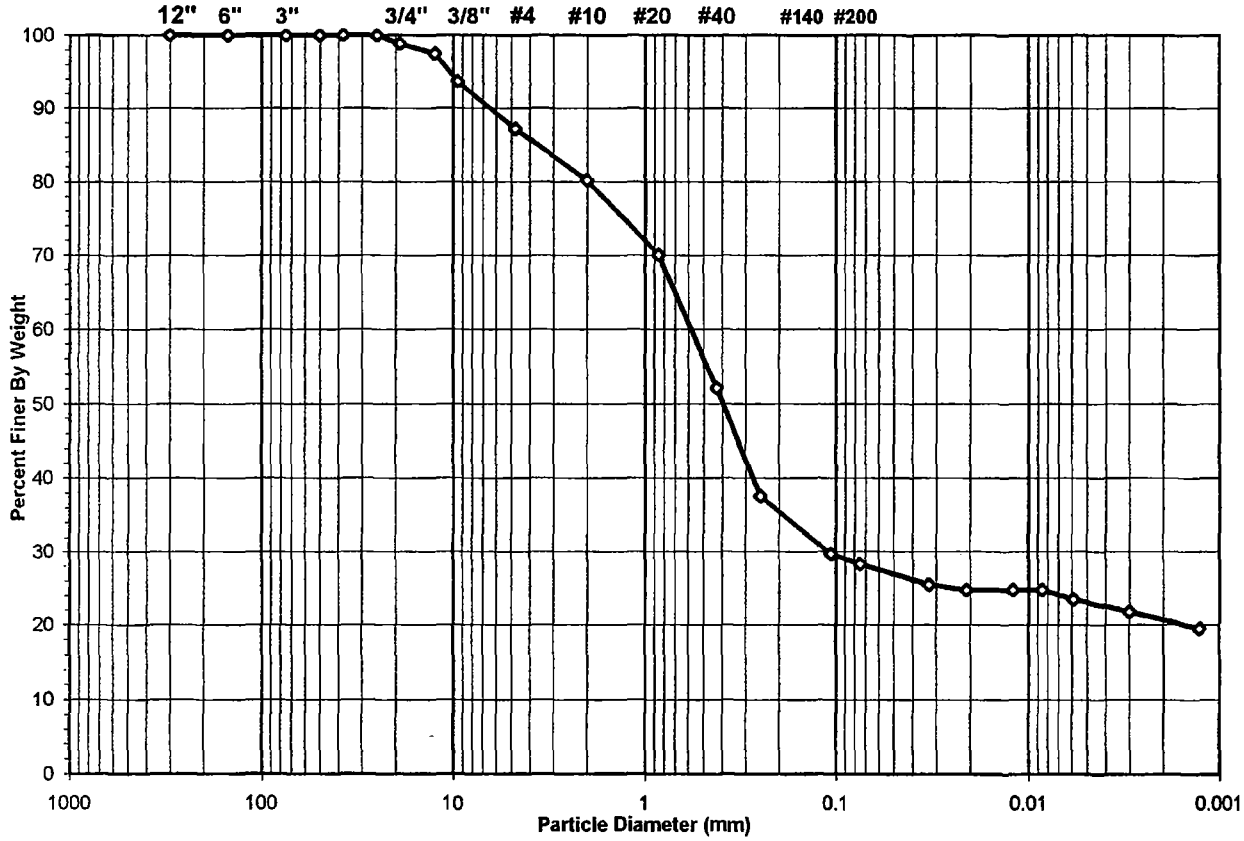
SIEVE AND HYDROMETER ANALYSIS
ASTM D 422-63/AASHTO T88-00 (SOP-S3)

Client	SHAW E&I	Boring No.	SELECT FILL
Client Reference	NAVY / OLSEN ROAD LF 115273	Depth (ft)	STINNETTS
Project No.	2006-057-02	Sample No.	2/17/06
Lab ID	2006-057-02-01	Soil Color	**REDDISH BROWN**

	SIEVE ANALYSIS			*HYDROMETER*	
USCS	cobbles	gravel	sand	silt and clay fraction	
USDA	cobbles	gravel	sand	silt	clay



USCS Summary

Sieve Sizes (mm)		Percentage
Greater Than #4	*Gravel*	12.82
#4 To #200	*Sand*	58.82
Finer Than #200	*Silt & Clay*	28.35

USCS Symbol ***SC, TESTED***

USCS Classification ***CLAYEY SAND***

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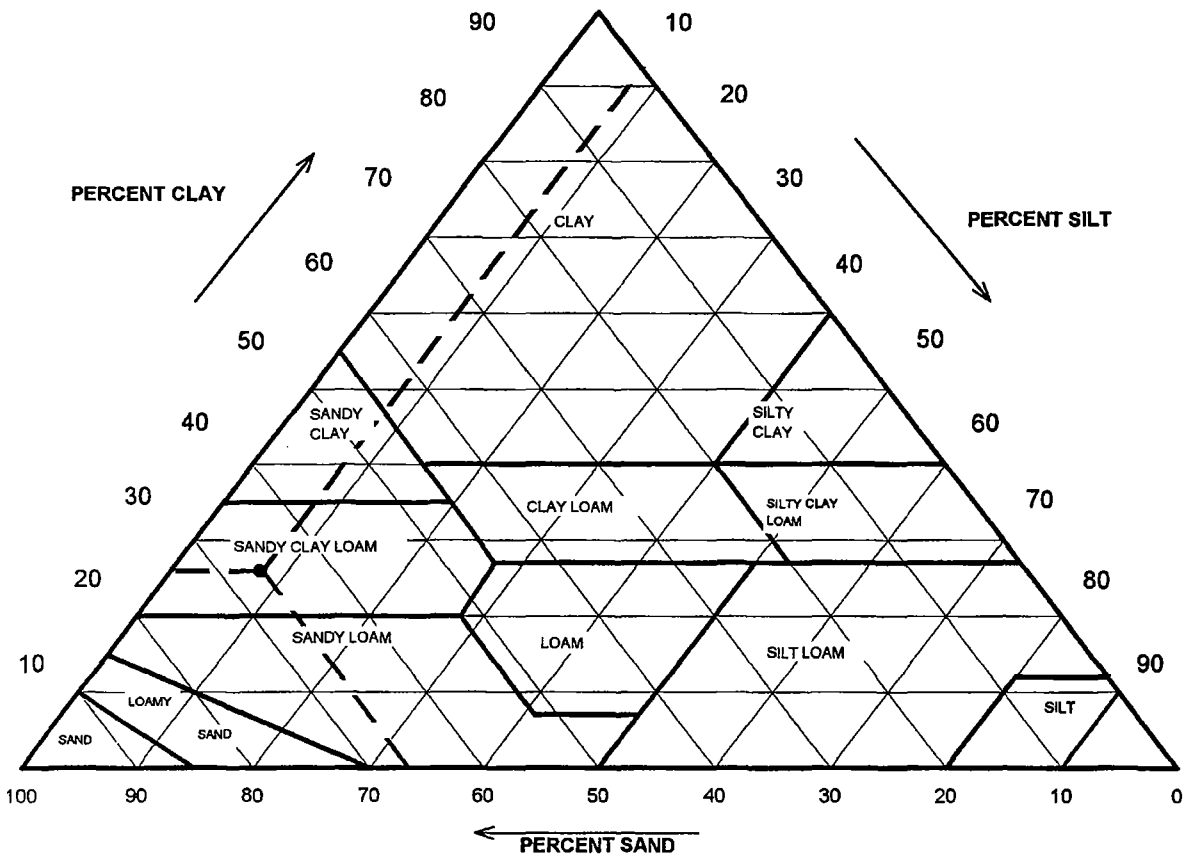
USDA CLASSIFICATION CHART

Client	SHAW E&I	Boring No.	SELECT FILL
Client Reference	NAVY / OLSEN ROAD LF 115273	Depth (ft)	STINNETTS
Project No.	2006-057-02	Sample No.	2/17/06
Lab ID	2006-057-02-01	Soil Color	REDDISH BROWN



Particle Size (mm)	Percent Finer	USDA SUMMARY	Actual Percentage	Corrected % of Minus 2.0 mm material for USDA Classificat.
		Gravel	19.81	**0.00**
2	80.19	*Sand*	53.23	**66.38**
0.05	26.96	*Silt*	6.22	**7.76**
0.002	20.74	*Clay*	20.74	**25.86**

USDA Classification ***SANDY CLAY LOAM***

DCN: CT-S3B DATE:1/30/04 REVISION: 6

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WASH SIEVE ANALYSIS

ASTM D 422-63/AASHTO T88-00 (SOP-S3)

Client	SHAW E&I	Boring No.	SELECT FILL
Client Reference	NAVY / OLSEN ROAD LF 115273	Depth (ft)	STINNETTS
Project No.	2006-057-02	Sample No.	2/17/06
Lab ID	2006-057-02-01	Soil Color	**REDDISH BROWN**

Moisture Content of Passing 3/4" Material		Water Content of Retained 3/4" Material	
Tare No.	920	Tare No.	553
Wgt.Tare + Wet Specimen (gm)	979.00	Wgt.Tare + Wet Specimen (gm)	167.80
Wgt.Tare + Dry Specimen (gm)	883.40	Wgt.Tare + Dry Specimen (gm)	166.64
Weight of Tare (gm)	103.05	Weight of Tare (gm)	84.32
Weight of Water (gm)	95.60	Weight of Water (gm)	1.16
Weight of Dry Soil (gm)	780.35	Weight of Dry Soil (gm)	82.32
Moisture Content (%)	**12.3**	**Moisture Content (%)**	**1.4**

Wet Weight -3/4" Sample (gm)	8107	Weight of the Dry Specimen (gm)	780.35
Dry Weight - 3/4" Sample (gm)	7222.2	Weight of minus #200 material (gm)	223.78
Wet Weight +3/4" Sample (gm)	83.77	Weight of plus #200 material (gm)	556.57
Dry Weight + 3/4" Sample (gm)	82.61		
Total Dry Weight Sample (gm)	7304.8	**J - Factor (Percent Finer than 3/4")**	**0.9887**

Sieve Size	Sieve Opening (mm)	Wgt.of Soil Retained (gm)		Percent Retained (%)	Accumulated Percent Retained (%)	Percent Finer (%)	Accumulated Percent Finer (%)
12"	300	0.00		0.00	0.00	100.00	**100.00**
6"	150	0.00		0.00	0.00	100.00	**100.00**
3"	75	0.00		0.00	0.00	100.00	**100.00**
2"	50	0.00	(*)	0.00	0.00	100.00	**100.00**
1 1/2"	37.5	0.00		0.00	0.00	100.00	**100.00**
1"	25.0	0.00		0.00	0.00	100.00	**100.00**
3/4"	19.0	83.77		1.13	1.13	98.87	**98.87**
1/2"	12.5	10.77		1.38	1.38	98.62	**97.50**
3/8"	9.50	29.68		3.80	5.18	94.82	**93.74**
#4	4.75	51.84		6.64	11.83	88.17	**87.18**
#10	2.00	55.14		7.07	18.89	81.11	**80.19**
#20	0.85	79.95	(**)	10.25	29.14	70.86	**70.06**
#40	0.425	141.65		18.15	47.29	52.71	**52.11**
#60	0.250	114.78		14.71	62.00	38.00	**37.57**
#140	0.106	61.97		7.94	69.94	30.06	**29.72**
#200	0.075	10.79		1.38	71.32	28.68	**28.35**
Pan	-	223.78		28.68	100.00	-	-

Notes : *(*) The + 3/4" sieve analysis is based on the Total Dry Weight of the Sample*
*(**) The - 3/4" sieve analysis is based on the Weight of the Dry Specimen*

Tested By PC Date 2/22/06 Checked By KB Date 3-1-06

DCN: CT-S3B DATE:1/30/04 REVISION: 6

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INTEGRITY IN TESTING

HYDROMETER ANALYSIS

ASTM D 422-63/AASHTO T88-00 (SOP-S3)

Client	SHAW E&I	Boring No.	SELECT FILL
Client Reference	NAVY / OLSEN ROAD LF 115273	Depth (ft)	STINNETTS
Project No.	2006-057-02	Sample No.	2/17/06
Lab ID	2006-057-02-01	Soil Color	**REDDISH BROWN**

Elapsed Time (min)		R Measured	Temp. (°C)	Composite Correction	R Corrected	N (%)	K Factor	Diameter (mm)	N' (%)
0	NA	NA	NA	NA	NA	NA	NA	NA	NA
2	25.0	25.0	20.8	7.23	17.8	90.0	0.01332	0.0329	**25.5**
5		24.5	20.8	7.23	17.3	87.5	0.01332	0.0209	**24.8**
15		24.5	20.8	7.23	17.3	87.5	0.01332	0.0120	**24.8**
30		24.5	20.8	7.23	17.3	87.5	0.01332	0.0085	**24.8**
64		23.5	21	7.16	16.3	82.8	0.01328	0.0059	**23.5**
250		22.5	20.6	7.31	15.2	77.0	0.01335	0.0030	**21.8**
1440		21.0	20.3	7.42	13.6	68.8	0.01340	0.0013	**19.5**

Soil Specimen Data		**Other Corrections**	
Tare No.	1623		
Tare + Dry Material (gm)	117.56	a - Factor	0.99
Weight of Tare (gm)	93.02		
Weight of Deflocculant (gm)	5.0	Percent Finer than # 200	28.35
Weight of Dry Material (gm)	19.54		
		Specific Gravity	2.7 Assumed

Note: *Hydrometer test is performed on - # 200 sieve material.*

Tested By TO Date 2/27/06 Checked By KB Date 3-1-06

DCN: CT-S3B DATE:1/30/04 REVISION: 6

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COMPACTION TEST REPORT

Project No.: **Date:** 3/4/06
Project: Olsen Road Landfill

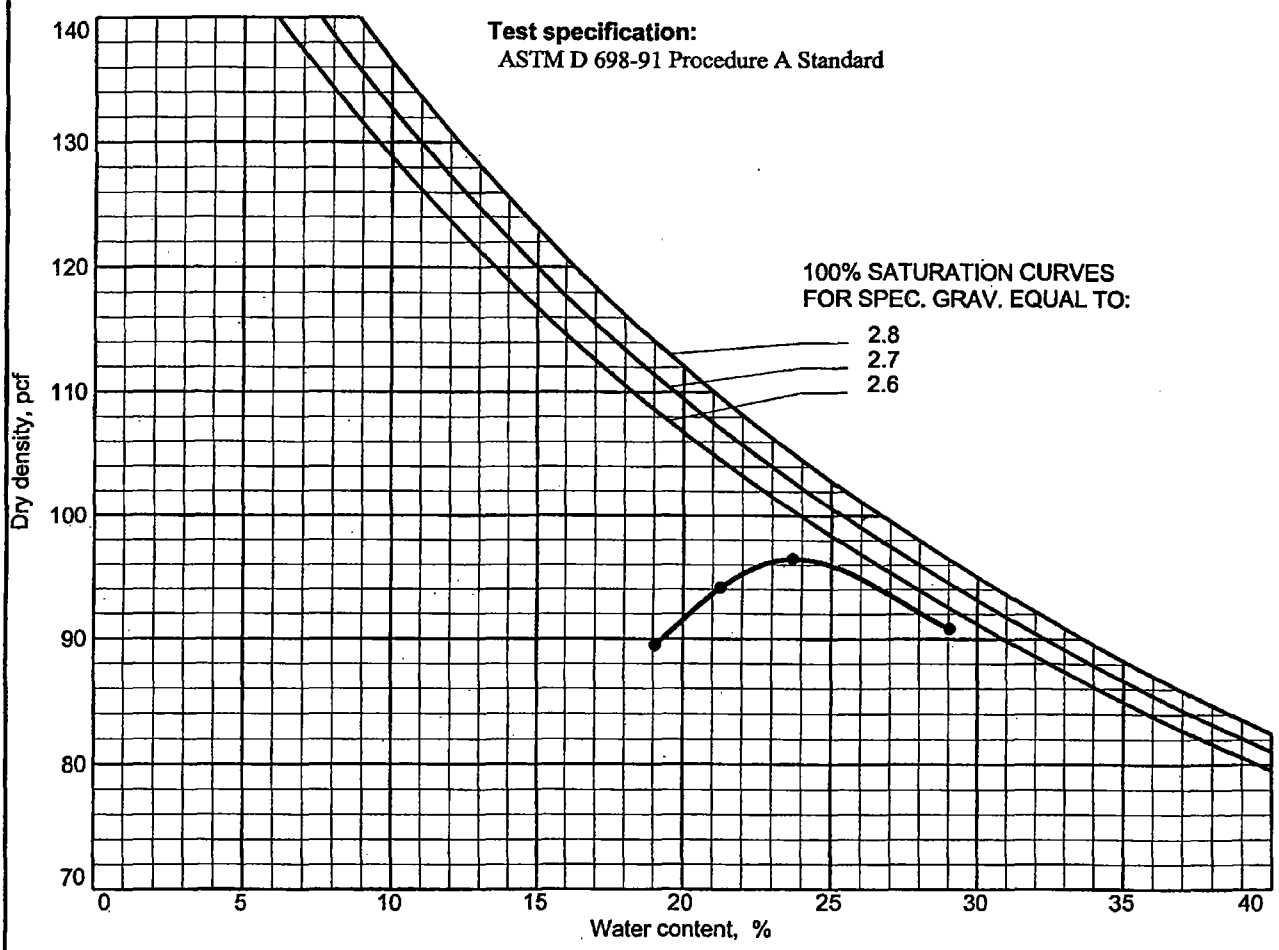
Location: Bucket
Elev./Depth: n/a **Sample No.** n/a
Remarks: Tested by: HJ Reviewed by: JW

MATERIAL DESCRIPTION

Description:

Classifications - **USCS:** **AASHTO:**
Nat. Moist. = **Sp.G. =** 2.70
Liquid Limit = **Plasticity Index =**
% > No.4 = % **% < No.200 =**

TEST RESULTS
Maximum dry density = 96.5 pcf
Optimum moisture = 23.8 %



Lab

GeoTesting Express Inc.

June 6, 2006

FSSI/Shaw
Attn: Adam Forshey, Jr.
Naval Surface Warfare Center
Construction Trailer ADJ to Bldg 892
Indian Head, MD 20640

Mr. Forshey,

I, Ed Stinnett, verify that the select fill Stinnett's Gravel is providing to you is from a virgin borrow source that is free of contaminants. To the best of my knowledge the soil comes from an area that has never stored any hazardous materials/wastes. The soils that are being provided to FSSI/Shaw for this project at Site 57 are of the same type and source as the soils provided for the Olsen Road Landfill.

Please contact me if you have any more questions or concerns. I can be reached by phone at 301-632-6694.

Respectfully,

Ed Stinnett
Stinnett's Gravel

SUBMITTAL PACKAGE TRANSMITTAL FORM

(CONTRACTING OFFICER APPROVAL)

SUBMITTAL PACKAGE TRANSMITTAL FORM - LANTDIV CONTRACT NO. N62470-03-D-4402 (For Transmitting Product Data, Shop Drawings, Material Samples and Administrative Data)	Date 6/6/2006	Transmittal No. 001

SECTION 1 - REQUEST FOR CONTRACT OFFICER APPROVAL

To:	From:	Project Title: Interim Removal Action at Site 57 - Building 292 TCE Removal	Check One
Navy	FSSI/Shaw	Location: Indian Head, Maryland Task Order No.: 025	☑ Initial Submittal ☐ Re-submittal
Project/Job No.: 115273		Specification Section:	SD Number:

Item No.	Description of Item(s) Submitted	Contract Reference Document: Spec Para No.	Contract Reference Document: Dwg. Sht. No.	No. of Copies	FOR CO REVIEW ONLY: ACTION CODE	FOR CO REVIEW ONLY: DATE
002-01	Topsoil from Farm Services - Site 57 Chemical Analysis Results	3.5	NA	1		
002-02	Topsoil from Farm Services - Site 57 Agronomy Testing Results	3.5	NA	1		
002-03	Topsoil from Farm Services - Site 57 Confirmation of Soils Letter from Farm Services	3.5	NA	1		

Action Code Comments/Explanation

A - Approved
AN - Approved as Noted
NR - Not Reviewed
RR - Revise & Resubmit
D - Disapproved

(Use Continuation Sheet, if necessary)

Certification Statement: I hearby certify that the equipment, material, or article shown and marked in this submittal is proposed to be incorporated into Contract Number N62470-02-D-4402, is in compliance with the contract drawings and specificaions, can be installed in the allocated spaces, and is submitted for Government approval.

Certified by Submittal Reviewer Carol Herod Date 6-21-06

Certified by QC Manager Robert Foosbury Date 6/21/06

SECTION II - APPROVAL ACTION (Please provide action code(s) in above review block)

Distribution:

Approving Authority:

Signature Title Date

Southeast ACCUTEST Laboratories

IT'S ALL IN THE CHEMISTRY

06/21/06

Technical Report for

Shaw E & I, Inc.

Indian Head

120359

Accutest Job Number: F41365

Sampling Date: 06/08/06

Report to:

Shaw E & I, Inc.

natasha.sullivan@shawgrp.com

ATTN: Natasha Sullivan

Total number of pages in report: 41

ACCUTEST LABORATORIES 50 YEARS 1956-2006

ACCREDITED IN ACCORDANCE WITH nelac

Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

Harry Behzadi, Ph.D.
Laboratory Director

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK

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Sample Summary

Shaw E & I, Inc.

Job No: F41365

Indian Head
Project No: 120359

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F41365-1	06/08/06	14:30 AF	06/09/06	SO	Soil	120359-TS-SO-001

Soil samples reported on a dry weight basis unless otherwise indicated on result page.

Sample Results

Report of Analysis

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-TS-SO-001		
Lab Sample ID:	F41365-1	**Date Sampled:**	06/08/06
Matrix:	SO - Soil	**Date Received:**	06/09/06
Method:	SW846 8260B SW846 1311	**Percent Solids:**	n/a
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	J023250.D	10	06/16/06	MM	06/13/06	OP16887	VJ956
Run #2							

	Purge Volume
Run #1	5.0 ml
Run #2	

VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	ND	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	105%		86-115%
2037-26-5	Toluene-D8	95%		86-112%
460-00-4	4-Bromofluorobenzene	110%		83-119%
17060-07-0	1,2-Dichloroethane-D4	113%		73-126%

ND = Not detected MDL - Method Detection Limit
MCL = Maximum Contamination Level (40 CFR 261 6/96)
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-TS-SO-001		
Lab Sample ID:	F41365-1	**Date Sampled:**	06/08/06
Matrix:	SO - Soil	**Date Received:**	06/09/06
Method:	SW846 8270C SW846 3510C	**Percent Solids:**	n/a
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	R03460.D	1	06/14/06	NJ	06/14/06	OP16905	SR161
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

ABN TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	47%		19-90%
4165-62-2	Phenol-d5	32%		10-68%
118-79-6	2,4,6-Tribromophenol	89%		36-137%
4165-60-0	Nitrobenzene-d5	83%		49-119%
321-60-8	2-Fluorobiphenyl	86%		45-118%
1718-51-0	Terphenyl-d14	92%		46-135%

ND = Not detected MDL - Method Detection Limit
MCL = Maximum Contamination Level (40 CFR 261 6/96)
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-TS-SO-001		
Lab Sample ID:	F41365-1	**Date Sampled:**	06/08/06
Matrix:	SO - Soil	**Date Received:**	06/09/06
Method:	SW846 8081A SW846 3510C	**Percent Solids:**	n/a
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	KK13004.D	1	06/15/06	AA	06/15/06	OP16913	GKK491
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Pesticide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	92%		60-138%
2051-24-3	Decachlorobiphenyl	91%		31-148%

ND = Not detected MDL - Method Detection Limit
MCL = Maximum Contamination Level (40 CFR 261 6/96)
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-TS-SO-001		
Lab Sample ID:	F41365-1	**Date Sampled:**	06/08/06
Matrix:	SO - Soil	**Date Received:**	06/09/06
Method:	SW846 8151 SW846 3510C	**Percent Solids:**	n/a
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	DD56813.D	1	06/20/06	ATX	06/20/06	T:OP6026	T:GDD1059
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Herbicide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.015	0.011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.0020	0.00060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	110%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected MDL - Method Detection Limit
MCL = Maximum Contamination Level (40 CFR 261 6/96)
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-TS-SO-001		
Lab Sample ID:	F41365-1	**Date Sampled:**	06/08/06
Matrix:	SO - Soil	**Date Received:**	06/09/06
		Percent Solids:	n/a
Project:	Indian Head		

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed	By	Method
Arsenic	0.014 U	D004	5.0	0.020	0.014	mg/l	1	06/15/06	06/15/06	RS	SW846 6010B [1]
Barium	0.40 B	D005	100	1.0	0.20	mg/l	1	06/15/06	06/15/06	RS	SW846 6010B [1]
Cadmium	0.00081 B	D006	1.0	0.0050	0.00030	mg/l	1	06/15/06	06/15/06	RS	SW846 6010B [1]
Chromium	0.0015 B	D007	5.0	0.010	0.00060	mg/l	1	06/15/06	06/15/06	RS	SW846 6010B [1]
Lead	0.024 B	D008	5.0	0.050	0.0017	mg/l	1	06/15/06	06/15/06	RS	SW846 6010B [1]
Mercury	0.0010 U	D009	0.20	0.010	0.0010	mg/l	1	06/16/06	06/16/06	MS	SW846 7470A [2]
Selenium	0.038 B	D010	1.0	0.050	0.020	mg/l	1	06/15/06	06/15/06	RS	SW846 6010B [1]
Silver	0.00090 U	D011	5.0	0.010	0.00090	mg/l	1	06/15/06	06/15/06	RS	SW846 6010B [1]

(1) Instrument QC Batch: MA5035
(2) Instrument QC Batch: MA5036
(3) Prep QC Batch: MP9765
(4) Prep QC Batch: MP9776

RL = Reporting Limit MDL = Method Detection Limit U = Indicates a result < MDL
MCL = Maximum Contamination Level (40 CFR 261 6/96) B = Indicates a result > = MDL but < RL

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-TS-SO-001		
Lab Sample ID:	F41365-1	**Date Sampled:**	06/08/06
Matrix:	SO - Soil	**Date Received:**	06/09/06
		Percent Solids:	n/a
Project:	Indian Head		

General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	6.1			1	06/14/06	CP	SW846 CHAP7
Cyanide Reactivity	< 1.5	1.5	mg/kg	1	06/16/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) [a]	> 200		Deg. F	1	06/15/06	CP	SW846 1010
Sulfide Reactivity	< 50	50	mg/kg	1	06/16/06	LE	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit

Misc. Forms

Custody Documents and Other Forms

Includes the following where applicable:

- Chain of Custody

F41365

CHAIN-OF-CUSTODY RECORD

COC Number: 120359-060806
Purchase Order Number:

Shaw The Shaw Group Inc.

3.1 3

SHAW Environmental & Infrastructure, INC. - 5700 Thurston Ave Suite 116B - Virginia Beach, VA 23455 - (757) 363-7190

Lab Destination	Lab Receiving Address	Analysis Desired
Accutest	4405 Vineland Road Suite C-1, Orlando FL 32811 (407)425-6700	

Project Name	Sample Location	
Indian Head Site 57	Disposal Samples	

Project Number	Shaw Contact	Shaw Contact Number
120359	Natasha Kelley Sullivan	(410)529-7598

Client Rep	Project Manager
LANTDIV	Steve Carriere

Item No.	Sample Number	Date	Time	Matrix Water	Matrix Soil	Sample Description	Number of Containers	Full TCL+RCISW-846
1	120359-TS-SO-001	06/08/06	14:30		X	Topsoil Sample	3 - 8 oz. + 1 - 4 oz. = 4	X
2								
3								
4								
5								
6								
7								
8								
9								
10								

6/8/06

Turnaround Time Required:	Sampled By:	COMMENTS:	Laboratory Report No.:
☒ 1 Week TAT	Adam Forshey, SHAW	TOPSOIL SAMPLE SITE 57	

Transfer Number	Transfers Relinquished By	Date	Time	Transfers Accepted By	Date	Time	Remarks
1	ADAM FORSHEY	6/8/06	1430	FX			Summary Report
2	FX			ALSF	6/9/06	9:00	Deliverables: EDD Excel
3							*** Fax results to Natasha Sullivan (410) 529-7599
4							

1.8

F41365: Chain of Custody
Page 1 of 2

ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION

ACCUTEST'S JOB NUMBER: F41365 CLIENT: Shaw PROJECT: Indian Head Site 57

DATE/TIME RECEIVED: 6/9/08 9:00 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 1.8

METHOD OF DELIVERY: (FEDEX) UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER

AIRBILL NUMBERS: 855591024692

COOLER INFORMATION

- [ ] CUSTODY SEAL NOT PRESENT OR NOT INTACT
- [ ] CHAIN OF CUSTODY NOT RECEIVED (COC)
- [ ] ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- [ ] SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- [ ] TEMPERATURE CRITERIA NOT MET

TRIP BLANK INFORMATION

- [x] TRIP BLANK NOT PROVIDED
- [x] TRIP BLANK NOT ON COC
- [ ] TRIP BLANK INTACT
- [ ] TRIP BLANK NOT INTACT
- [ ] RECEIVED WATER TRIP BLANK
- [ ] RECEIVED SOIL TRIP BLANK

SAMPLE INFORMATION

- [ ] SAMPLE LABELS PRESENT ON ALL BOTTLES
- [ ] CORRECT NUMBER OF CONTAINERS USED
- [ ] SAMPLE RECEIVED IMPROPERLY PRESERVED
- [ ] INSUFFICIENT VOLUME FOR ANALYSIS
- [ ] TIMES ON COC DON'T MATCH LABEL
- [ ] ID'S ON COC DON'T MATCH LABEL
- [ ] VOC VIALS HAVE HEADSPACE (MACRO BUBBLES)
- [ ] BOTTLES RECEIVED BUT ANALYSIS NOT REQUESTED
- [ ] NO BOTTLES RECEIVED FOR ANALYSIS REQUESTED
- [ ] UNCLEAR FILTERING INSTRUCTIONS
- [ ] UNCLEAR COMPOSITING INSTRUCTIONS
- [ ] SAMPLE CONTAINER(S) RECEIVED BROKEN
- [ ] % SOLIDS JAR NOT RECEIVED
- [ ] 5035 FIELD KIT FROZEN WITHIN 48 HOUR'S

MISC. INFORMATION

NUMBER OF ENCORES ? X

NUMBER OF 5035 FIELD KITS ? X

NUMBER OR LAB FILTERED METALS ? X

SUMMARY OF COMMENTS:

TECHNICIAN SIGNATURE/DATE [signature] 6/9/08 TECHNICIAN SIGNATURE/DATE

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F41365: Chain of Custody
Page 2 of 2

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GC/MS Volatiles

QC Data Summaries

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Leachate Blank Summary

Job Number: F41365
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16887-LB	J023248.D	10	06/16/06	MM	06/13/06	OP16887	VJ956

The QC reported here applies to the following samples: **Method:** SW846 8260B

F41365-1

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	10	5.0	ug/l	
108-90-7	Chlorobenzene	ND	20	5.0	ug/l	
67-66-3	Chloroform	ND	20	5.0	ug/l	
56-23-5	Carbon tetrachloride	ND	20	5.0	ug/l	
75-35-4	1,1-Dichloroethylene	ND	20	5.0	ug/l	
107-06-2	1,2-Dichloroethane	ND	20	5.0	ug/l	
106-46-7	p-Dichlorobenzene	ND	20	5.0	ug/l	
78-93-3	Methyl ethyl ketone	ND	100	25	ug/l	
127-18-4	Tetrachloroethylene	ND	20	5.0	ug/l	
79-01-6	Trichloroethylene	ND	20	5.0	ug/l	
75-01-4	Vinyl chloride	ND	10	5.0	ug/l	

CAS No.	Surrogate Recoveries		Limits
1868-53-7	Dibromofluoromethane	104%	86-115%
17060-07-0	1,2-Dichloroethane-D4	106%	73-126%
2037-26-5	Toluene-D8	95%	86-112%
460-00-4	4-Bromofluorobenzene	107%	83-119%

Blank Spike Summary

Job Number: F41365
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VJ956-BS	J023247.D	10	06/16/06	MM	n/a	n/a	VJ956

The QC reported here applies to the following samples: **Method:** SW846 8260B

F41365-1

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
71-43-2	Benzene	250	274	110	80-120
108-90-7	Chlorobenzene	250	250	100	82-112
67-66-3	Chloroform	250	257	103	78-118
56-23-5	Carbon tetrachloride	250	258	103	69-137
75-35-4	1,1-Dichloroethylene	250	258	103	67-134
107-06-2	1,2-Dichloroethane	250	260	104	68-121
106-46-7	p-Dichlorobenzene	250	239	96	77-113
78-93-3	Methyl ethyl ketone	1250	1220	98	58-127
127-18-4	Tetrachloroethylene	250	193	77	75-126
79-01-6	Trichloroethylene	250	260	104	80-115
75-01-4	Vinyl chloride	250	369	148	70-151

CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	99%	86-115%
17060-07-0	1,2-Dichloroethane-D4	103%	73-126%
2037-26-5	Toluene-D8	93%	86-112%
460-00-4	4-Bromofluorobenzene	97%	83-119%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41365
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41363-1MS	J023256.D	10	06/16/06	MM	n/a	n/a	VJ956
F41363-1MSD	J023257.D	10	06/16/06	MM	n/a	n/a	VJ956
F41363-1	J023253.D	10	06/16/06	MM	06/12/06	OP16869	VJ956

The QC reported here applies to the following samples: **Method:** SW846 8260B

F41365-1

CAS No.	Compound	F41363-1 ug/l	Q	Spike ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
71-43-2	Benzene	10 U		250	274	110	263	105	4	72-125/7
108-90-7	Chlorobenzene	20 U		250	239	96	235	94	2	79-113/7
67-66-3	Chloroform	20 U		250	276	110	261	104	6	75-120/8
56-23-5	Carbon tetrachloride	20 U		250	281	112	265	106	6	56-145/12
75-35-4	1,1-Dichloroethylene	20 U		250	281	112	262	105	7	61-137/15
107-06-2	1,2-Dichloroethane	20 U		250	299	120	276	110	8*	64-124/7
106-46-7	p-Dichlorobenzene	20 U		250	235	94	233	93	1	74-112/7
78-93-3	Methyl ethyl ketone	100 U		1250	1260	101	1270	102	1	51-128/10
127-18-4	Tetrachloroethylene	20 U		250	181	72	190	76	5	70-126/9
79-01-6	Trichloroethylene	20 U		250	266	106	260	104	2	73-117/10
75-01-4	Vinyl chloride	10 U		250	350	140	377	151	7	63-161/18

CAS No.	Surrogate Recoveries	MS	MSD	F41363-1	Limits
1868-53-7	Dibromofluoromethane	104%	101%	110%	86-115%
17060-07-0	1,2-Dichloroethane-D4	125%	117%	123%	73-126%
2037-26-5	Toluene-D8	89%	92%	97%	86-112%
460-00-4	4-Bromofluorobenzene	96%	98%	111%	83-119%

Duplicate Summary

Job Number: F41365
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41456-1ADUP	J023255.D	10	06/16/06	MM	n/a	n/a	VJ956
F41456-1A	J023252.D	10	06/16/06	MM	06/15/06	OP16919	VJ956

The QC reported here applies to the following samples: **Method:** SW846 8260B

F41365-1

CAS No.	Compound	F41456-1A ug/l	Q	DUP ug/l	Q	RPD	Limits
71-43-2	Benzene	ND		ND		nc	
108-90-7	Chlorobenzene	ND		ND		nc	
67-66-3	Chloroform	ND		ND		nc	
56-23-5	Carbon tetrachloride	ND		ND		nc	
75-35-4	1,1-Dichloroethylene	ND		ND		nc	
107-06-2	1,2-Dichloroethane	ND		ND		nc	
106-46-7	p-Dichlorobenzene	ND		ND		nc	
78-93-3	Methyl ethyl ketone	ND		ND		nc	
127-18-4	Tetrachloroethylene	ND		ND		nc	
79-01-6	Trichloroethylene	27.4		27.0		1	
75-01-4	Vinyl chloride	ND		ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41456-1A	Limits
1868-53-7	Dibromofluoromethane	110%	105%	86-115%
17060-07-0	1,2-Dichloroethane-D4	119%	114%	73-126%
2037-26-5	Toluene-D8	96%	95%	86-112%
460-00-4	4-Bromofluorobenzene	116%	112%	83-119%

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GC/MS Semi-volatiles

QC Data Summaries

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Leachate Blank Summary

Job Number: F41365
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16905-LB	R03459.D	1	06/14/06	NJ	06/14/06	OP16905	SR161

The QC reported here applies to the following samples: **Method:** SW846 8270C

F41365-1

CAS No.	Compound	Result	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	50	20	ug/l	
	3&4-Methylphenol	ND	50	20	ug/l	
87-86-5	Pentachlorophenol	ND	250	100	ug/l	
95-95-4	2,4,5-Trichlorophenol	ND	50	20	ug/l	
88-06-2	2,4,6-Trichlorophenol	ND	50	20	ug/l	
106-46-7	1,4-Dichlorobenzene	ND	50	10	ug/l	
121-14-2	2,4-Dinitrotoluene	ND	50	20	ug/l	
118-74-1	Hexachlorobenzene	ND	50	10	ug/l	
87-68-3	Hexachlorobutadiene	ND	50	20	ug/l	
67-72-1	Hexachloroethane	ND	50	20	ug/l	
98-95-3	Nitrobenzene	ND	50	10	ug/l	
110-86-1	Pyridine	ND	100	30	ug/l	

CAS No.	Surrogate Recoveries		Limits
367-12-4	2-Fluorophenol	53%	19-90%
4165-62-2	Phenol-d5	35%	10-68%
118-79-6	2,4,6-Tribromophenol	91%	36-137%
4165-60-0	Nitrobenzene-d5	81%	49-119%
321-60-8	2-Fluorobiphenyl	85%	45-118%
1718-51-0	Terphenyl-d14	90%	46-135%

Blank Spike Summary

Job Number: F41365
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16905-LBS	R03458.D	1	06/14/06	NJ	06/14/06	OP16905	SR161

The QC reported here applies to the following samples: **Method:** SW846 8270C

F41365-1

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
95-48-7	2-Methylphenol	500	374	75	48-90
	3&4-Methylphenol	1000	682	68	43-94
87-86-5	Pentachlorophenol	1000	916	92	62-120
95-95-4	2,4,5-Trichlorophenol	500	445	89	67-103
88-06-2	2,4,6-Trichlorophenol	500	437	87	68-104
106-46-7	1,4-Dichlorobenzene	500	438	88	46-96
121-14-2	2,4-Dinitrotoluene	500	442	88	64-107
118-74-1	Hexachlorobenzene	500	462	92	69-103
87-68-3	Hexachlorobutadiene	500	497	99	48-100
67-72-1	Hexachloroethane	500	450	90	41-98
98-95-3	Nitrobenzene	500	444	89	60-102
110-86-1	Pyridine	500	175	35	17-65

CAS No.	Surrogate Recoveries	BSP	Limits
367-12-4	2-Fluorophenol	58%	19-90%
4165-62-2	Phenol-d5	39%	10-68%
118-79-6	2,4,6-Tribromophenol	96%	36-137%
4165-60-0	Nitrobenzene-d5	90%	49-119%
321-60-8	2-Fluorobiphenyl	94%	45-118%
1718-51-0	Terphenyl-d14	99%	46-135%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41365
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16905-MS	R03461.D	1	06/14/06	NJ	06/14/06	OP16905	SR161
OP16905-MSD	R03462.D	1	06/14/06	NJ	06/14/06	OP16905	SR161
F41365-1	R03460.D	1	06/14/06	NJ	06/14/06	OP16905	SR161

The QC reported here applies to the following samples: **Method:** SW846 8270C

F41365-1

CAS No.	Compound	F41365-1 ug/l	Q	Spike ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
95-48-7	2-Methylphenol	ND		500	325	65	361	72	10	40-102/25
	3&4-Methylphenol	ND		1000	605	61	675	68	11	39-97/24
87-86-5	Pentachlorophenol	ND		1000	805	81	891	89	10	53-128/22
95-95-4	2,4,5-Trichlorophenol	ND		500	399	80	440	88	10	56-110/19
88-06-2	2,4,6-Trichlorophenol	ND		500	395	79	434	87	9	55-112/19
106-46-7	1,4-Dichlorobenzene	ND		500	392	78	441	88	12	43-102/24
121-14-2	2,4-Dinitrotoluene	ND		500	420	84	454	91	8	60-108/18
118-74-1	Hexachlorobenzene	ND		500	438	88	468	94	7	66-106/16
87-68-3	Hexachlorobutadiene	ND		500	449	90	500	100	11	46-107/26
67-72-1	Hexachloroethane	ND		500	405	81	453	91	11	39-105/25
98-95-3	Nitrobenzene	ND		500	402	80	446	89	10	50-107/25
110-86-1	Pyridine	ND		500	151	30	175	35	15	19-77/41

CAS No.	Surrogate Recoveries	MS	MSD	F41365-1	Limits
367-12-4	2-Fluorophenol	51%	57%	47%	19-90%
4165-62-2	Phenol-d5	34%	37%	32%	10-68%
118-79-6	2,4,6-Tribromophenol	89%	95%	89%	36-137%
4165-60-0	Nitrobenzene-d5	81%	90%	83%	49-119%
321-60-8	2-Fluorobiphenyl	86%	94%	86%	45-118%
1718-51-0	Terphenyl-d14	87%	95%	92%	46-135%

GC Semi-volatiles

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QC Data Summaries

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Leachate Blank Summary

Job Number: F41365
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16913-LB	KK13003.D	1	06/15/06	AA	06/16/06	OP16913	GKK491

The QC reported here applies to the following samples: **Method:** SW846 8081A

F41365-1

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	86%	60-138%
2051-24-3	Decachlorobiphenyl	95%	31-148%

Blank Spike Summary

Job Number: F41365
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16913-LBS	KK13002.D	1	06/15/06	AA	06/16/06	OP16913	GKK491

The QC reported here applies to the following samples: **Method:** SW846 8081A

F41365-1

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	5.3	106	69-137
72-20-8	Endrin	5	4.8	96	78-134
76-44-8	Heptachlor	5	5.1	102	62-137
1024-57-3	Heptachlor epoxide	5	5.0	100	74-130
72-43-5	Methoxychlor	5	5.0	100	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	100%	60-138%
2051-24-3	Decachlorobiphenyl	95%	31-148%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41365
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16913-MS	KK13005.D	1	06/15/06	AA	06/15/06	OP16913	GKK491
OP16913-MSD	KK13006.D	1	06/15/06	AA	06/15/06	OP16913	GKK491
F41365-1	KK13004.D	1	06/15/06	AA	06/15/06	OP16913	GKK491

The QC reported here applies to the following samples: **Method:** SW846 8081A

F41365-1

CAS No.	Compound	F41365-1 ug/l	Q	Spike ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
58-89-9	gamma-BHC (Lindane)	ND		5	5.2	104	5.3	106	2	75-140/21
72-20-8	Endrin	ND		5	4.9	98	5.0	100	2	72-149/21
76-44-8	Heptachlor	ND		5	5.3	106	5.4	108	2	74-136/25
1024-57-3	Heptachlor epoxide	ND		5	4.9	98	5.0	100	2	75-138/21
72-43-5	Methoxychlor	ND		5	5.4	108	5.5	110	2	69-145/27

CAS No.	Surrogate Recoveries	MS	MSD	F41365-1	Limits
877-09-8	Tetrachloro-m-xylene	99%	102%	92%	60-138%
2051-24-3	Decachlorobiphenyl	86%	90%	91%	31-148%

6.3

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Metals Analysis

QC Data Summaries

Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY
Part 2 - Method Blanks

Login Number: F41365
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9765
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: mg/l

Prep Date:			06/15/06		06/15/06	
Metal	RL	IDL	MB raw	final	MB raw	final
Aluminum	0.20	.018				
Antimony	0.0060	.0034				
Arsenic	0.020	.0028	-0.00044	<0.020	-0.015	<0.020
Barium	1.0	.0004	0.000040	<1.0	0.0021	<1.0
Beryllium	0.0050	.0004				
Cadmium	0.0050	.0002	-0.00025	<0.0050	-0.000060	<0.0050
Calcium	5.0	.042				
Chromium	0.010	.0006	-0.00049	<0.010	0.0039	<0.010
Cobalt	0.050	.0006				
Copper	0.025	.0009				
Iron	0.30	.012				
Lead	0.050	.0017	0.00049	<0.050	0.0023	<0.050
Magnesium	5.0	.0043				
Manganese	0.015	.0006				
Molybdenum	0.050	.0013				
Nickel	0.040	.0008				
Potassium	10	.01				
Selenium	0.050	.002	0.0026	<0.050	0.037	<0.050
Silver	0.010	.0009	0.00011	<0.010	0.00053	<0.010
Sodium	10	.5				
Thallium	0.010	.0023				
Tin	0.050	.0031				
Vanadium	0.050	.0006				
Zinc	0.10	.0013				

Associated samples MP9765: F41365-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

7.1.1

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MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41365
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9765
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: mg/l

Prep Date:			06/15/06					06/15/06	
Metal	F41271-1 Original	DUP	RPD	QC Limits	F41271-1 Original	MS	Spikelot MPFLICP1	% Rec	QC Limits
Aluminum									
Antimony									
Arsenic	0.0	0.0	NC	0-20	0.0	2.2	2.0	110.0	80-120
Barium	0.033	0.033	0.0	0-20	0.033	2.1	2.0	103.4	80-120
Beryllium									
Cadmium	0.00057	0.00040	35.1 (a)	0-20	0.00057	0.049	0.050	96.9	80-120
Calcium									
Chromium	0.0040	0.0042	4.9	0-20	0.0040	0.19	0.20	93.0	80-120
Cobalt									
Copper									
Iron									
Lead	0.0056	0.0060	6.9	0-20	0.0056	0.52	0.50	102.9	80-120
Magnesium									
Manganese									
Molybdenum									
Nickel									
Potassium									
Selenium	0.037	0.038	2.7	0-20	0.037	2.4	2.0	118.2	80-120
Silver	0.0	0.0010	200.0(a)	0-20	0.0	0.061	0.050	120.0	80-120
Sodium									
Thallium									
Tin									
Vanadium									
Zinc									

Associated samples MP9765: F41365-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(N) Matrix Spike Rec. outside of QC limits
(anr) Analyte not requested
(a) RPD acceptable due to low duplicate and sample concentrations.

7.1.2

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SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41365
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9765
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: mg/l

Prep Date:	06/15/06				06/15/06			
Metal	BSP Result	Spikelot MPFLICP1	% Rec	QC Limits	BSP Result	Spikelot MPFLICP1	% Rec	QC Limits
Aluminum								
Antimony								
Arsenic	2.1	2.0	105.0	80-120	2.2	2.0	110.0	80-120
Barium	2.1	2.0	105.0	80-120	2.0	2.0	100.0	80-120
Beryllium								
Cadmium	0.049	0.050	98.0	80-120	0.051	0.050	102.0	80-120
Calcium								
Chromium	0.20	0.20	100.0	80-120	0.21	0.20	105.0	80-120
Cobalt								
Copper								
Iron								
Lead	0.51	0.50	102.0	80-120	0.52	0.50	104.0	80-120
Magnesium								
Manganese								
Molybdenum								
Nickel								
Potassium								
Selenium	2.1	2.0	105.0	80-120	2.4	2.0	120.0	80-120
Silver	0.053	0.050	106.0	80-120	0.059	0.050	118.0	80-120
Sodium								
Thallium								
Tin								
Vanadium								
Zinc								

Associated samples MP9765: F41365-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

7.1.3

7

SERIAL DILUTION RESULTS SUMMARY

Login Number: F41365
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9765
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: ug/l

Prep Date: 06/15/06

Metal	F41271-1 Original	SDL 1:5	RPD	QC Limits
Aluminum				
Antimony				
Arsenic	0.00	0.00	NC	0-10
Barium	33.4	33.3	0.6	0-10
Beryllium				
Cadmium	0.570	0.00	100.0(a)	0-10
Calcium				
Chromium	4.00	5.79	44.8 (a)	0-10
Cobalt				
Copper				
Iron				
Lead	5.59	10.5	87.7 (a)	0-10
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	37.0	52.1	40.5 (a)	0-10
Silver	0.00	8.14		0-10
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP9765: F41365-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested
(a) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

BLANK RESULTS SUMMARY
Part 2 - Method Blanks

Login Number: F41365
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9776
Matrix Type: LEACHATE

Methods: SW846 7470A
Units: mg/l

Prep Date:			06/16/06		06/16/06		06/16/06	
Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Mercury	0.0010	.00008	-0.0000040	<0.0010	0.00010	<0.010	-0.00030	<0.010

Associated samples MP9776: F41365-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

7.2.1

7

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41365
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9776
Matrix Type: LEACHATE

Methods: SW846 7470A
Units: mg/l

Prep Date: 06/16/06 06/16/06

Metal	F41365-1 Original	DUP	RPD	QC Limits	F41365-1 Original	MS	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0	0.0	NC	0-20	0.0	0.031	0.030	103.3	80-120

Associated samples MP9776: F41365-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(N) Matrix Spike Rec. outside of QC limits
(anr) Analyte not requested

7.2.2

7

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41365
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9776
Matrix Type: LEACHATE

Methods: SW846 7470A
Units: mg/l

Prep Date:	06/16/06				06/16/06			
Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0030	0.0030	100.0	80-120	0.030	0.030	100.0	80-120

Associated samples MP9776: F41365-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

7.2.3

7

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41365
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9776
Matrix Type: LEACHATE

Methods: SW846 7470A
Units: mg/l

Prep Date: 06/16/06

Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.029	0.030	96.7	80-120

Associated samples MP9776: F41365-1

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

7.2.3

7

General Chemistry

QC Data Summaries

8

Includes the following where applicable:

- Method Blank and Blank Spike Summaries
- Duplicate Summaries
- Matrix Spike Summaries

METHOD BLANK AND SPIKE RESULTS SUMMARY
GENERAL CHEMISTRY

Login Number: F41365
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

Analyte	Batch ID	RL	MB Result	Units	Spike Amount	BSP Result	BSP %Recov	QC Limits
Cyanide Reactivity	GP7997/GN21043	1.5	<1.5	mg/kg	5.0	8.2	164.0*(a)	0-100%
Sulfide Reactivity	GP7998/GN21044	50	<50	mg/kg	53.7	62.5	116.0	0-100%

Associated Samples:
Batch GP7997: F41365-1
Batch GP7998: F41365-1
(a) High spike recovery.

8.1
8

DUPLICATE RESULTS SUMMARY
GENERAL CHEMISTRY

Login Number: F41365
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

Analyte	Batch ID	QC Sample	Units	Original Result	DUP Result	RPD	QC Limits
Corrosivity as pH	GN20998	F41365-1		6.1	6.1		0-%
Ignitability (Flashpoint)	GN21008	F41365-1	Deg. F	>200	0(a)	0.0	0-38%

Associated Samples:
Batch GN20998: F41365-1
Batch GN21008: F41365-1
(a) Not ignitable.

8.2 8

GC Semi-volatiles

QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Method Blank Summary

Job Number: F41365
Account: ALSE Accutest Laboratories Southeast, Inc.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6026-MB	DD56811.D	1	06/20/06	RC	06/20/06	OP6026	GDD1059

The QC reported here applies to the following samples: **Method:** SW846 8151

F41365-1

CAS No.	Compound	Result	RL	MDL	Units	Q
94-75-7	2,4-D	ND	10	5.0	ug/l	
93-72-1	2,4,5-TP (Silvex)	ND	2.0	1.5	ug/l	

CAS No.	Surrogate Recoveries		Limits
19719-28-9	2,4-DCAA	131%	23-171%

9.1

9

Blank Spike Summary

Job Number: F41365
Account: ALSE Accutest Laboratories Southeast, Inc.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6026-BS	DD56812.D	1	06/20/06	RC	06/20/06	OP6026	GDD1059

The QC reported here applies to the following samples: **Method:** SW846 8151

F41365-1

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
94-75-7	2,4-D	20	14.7	74	44-152
93-72-1	2,4,5-TP (Silvex)	4	2.4	60	41-142

CAS No.	Surrogate Recoveries	BSP	Limits
19719-28-9	2,4-DCAA	114%	23-171%

9.2

9

LabLink Analytical Data Report
Indian Head 120539

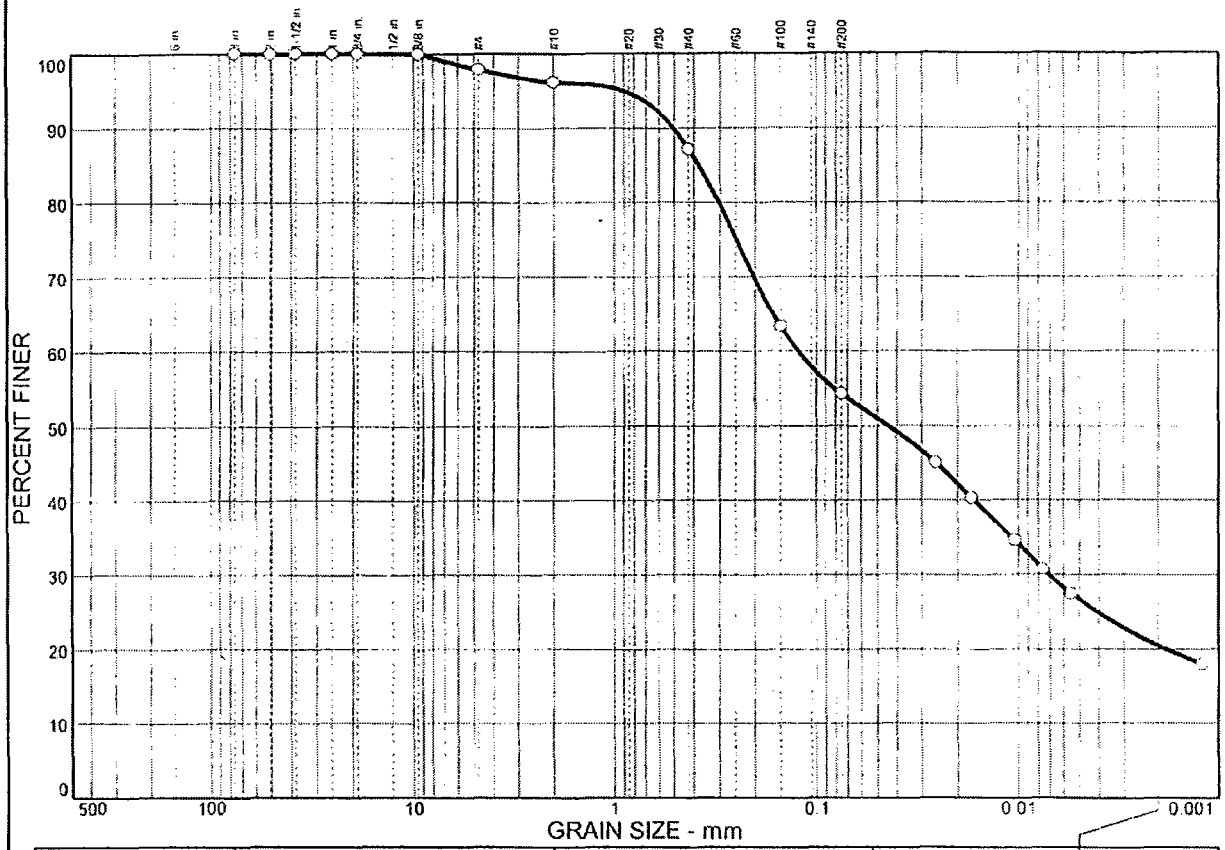
Including: TCLP Maximum Contaminant Concentrations (40 CFR 261 6/96)*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F41365-1	2,4-D	94-75-7	SW846 8151	ND		mg/l	0.015	10	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	2,4,5-TP (Silvex)	93-72-1	SW846 8151	ND		mg/l	0.002	1	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	gamma-BHC (Lindane)	58-89-9	SW846 8081A	ND		mg/l	0.0005	0.4	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Chlordane	12789-03-6	SW846 8081A	ND		mg/l	0.005	0.03	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Endrin	72-20-8	SW846 8081A	ND		mg/l	0.001	0.02	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Heptachlor	76-44-8	SW846 8081A	ND		mg/l	0.0005	0.008	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Heptachlor epoxide	1024-57-3	SW846 8081A	ND		mg/l	0.0005	0.008	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Methoxychlor	72-43-5	SW846 8081A	ND		mg/l	0.001	10	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Toxaphene	8001-35-2	SW846 8081A	ND		mg/l	0.025	0.5	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Tetrachloro-m-xylene	877-09-8	SW846 8081A	92		%			1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	2,4-DCAA	19719-28-9	SW846 8151	110		%			1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Decachlorobiphenyl	2051-24-3	SW846 8081A	91		%			1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Ignitability (Flashpoint) (b)		SW846 1010	>200	>	Deg. F			1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Corrosivity as pH		SW846 CHAP7	6.1					1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Sulfide Reactivity		SW846 CHAP7	<50	<	mg/kg	50		1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Cyanide Reactivity		SW846 CHAP7	<1.5	<	mg/kg	1.5		1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Arsenic	7440-38-2	SW846 6010B	0.014	U	mg/l	0.02	5	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Barium	7440-39-3	SW846 6010B	0.4	B	mg/l	1	100	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Cadmium	7440-43-9	SW846 6010B	0.00081	B	mg/l	0.005	1	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Chromium	7440-47-3	SW846 6010B	0.0015	B	mg/l	0.01	5	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Lead	7439-92-1	SW846 6010B	0.024	B	mg/l	0.05	5	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Mercury	7439-97-6	SW846 7470A	0.001	U	mg/l	0.01	0.2	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Selenium	7782-49-2	SW846 6010B	0.038	B	mg/l	0.05	1	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Silver	7440-22-4	SW846 6010B	0.0009	U	mg/l	0.01	5	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	2-Methylphenol	95-48-7	SW846 8270C	ND		mg/l	0.05	200	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	3&4-Methylphenol		SW846 8270C	ND		mg/l	0.05	200	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Pentachlorophenol	87-86-5	SW846 8270C	ND		mg/l	0.25	100	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	2,4,5-Trichlorophenol	95-95-4	SW846 8270C	ND		mg/l	0.05	400	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	2,4,6-Trichlorophenol	88-06-2	SW846 8270C	ND		mg/l	0.05	2	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	1,4-Dichlorobenzene	106-46-7	SW846 8270C	ND		mg/l	0.05	7.5	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	2,4-Dinitrotoluene	121-14-2	SW846 8270C	ND		mg/l	0.05	0.13	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Hexachlorobenzene	118-74-1	SW846 8270C	ND		mg/l	0.05	0.13	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Hexachlorobutadiene	87-68-3	SW846 8270C	ND		mg/l	0.05	0.5	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Hexachloroethane	67-72-1	SW846 8270C	ND		mg/l	0.05	3	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Nitrobenzene	98-95-3	SW846 8270C	ND		mg/l	0.05	2	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Pyridine	110-86-1	SW846 8270C	ND		mg/l	0.1	5	1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	2-Fluorophenol	367-12-4	SW846 8270C	47		%			1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Phenol-d5	4165-62-2	SW846 8270C	32		%			1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	2,4,6-Tribromophenol	118-79-6	SW846 8270C	89		%			1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Nitrobenzene-d5	4165-60-0	SW846 8270C	83		%			1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	2-Fluorobiphenyl	321-60-8	SW846 8270C	86		%			1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Terphenyl-d14	1718-51-0	SW846 8270C	92		%			1	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Benzene	71-43-2	SW846 8260B	ND		mg/l	0.01	0.5	10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Chlorobenzene	108-90-7	SW846 8260B	ND		mg/l	0.02	100	10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Chloroform	67-66-3	SW846 8260B	ND		mg/l	0.02	6	10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Carbon tetrachloride	56-23-5	SW846 8260B	ND		mg/l	0.02	0.5	10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	1,1-Dichloroethylene	75-35-4	SW846 8260B	ND		mg/l	0.02	0.7	10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	1,2-Dichloroethane	107-06-2	SW846 8260B	ND		mg/l	0.02	0.5	10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	p-Dichlorobenzene	106-46-7	SW846 8260B	ND		mg/l	0.02	7.5	10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Methyl ethyl ketone	78-93-3	SW846 8260B	ND		mg/l	0.1	200	10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Tetrachloroethylene	127-18-4	SW846 8260B	ND		mg/l	0.02	0.7	10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Trichloroethylene	79-01-6	SW846 8260B	ND		mg/l	0.02	0.5	10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Vinyl chloride	75-01-4	SW846 8260B	ND		mg/l	0.01	0.2	10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Dibromofluoromethane	1868-53-7	SW846 8260B	105		%			10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	Toluene-D8	2037-26-5	SW846 8260B	95		%			10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	4-Bromofluorobenzene	460-00-4	SW846 8260B	110		%			10	120359-TS-SO-001	8-Jun-06	14:30
F41365-1	1,2-Dichloroethane-D4	17060-07-0	SW846 8260B	113		%			10	120359-TS-SO-001	8-Jun-06	14:30

(b) Not ignitable
Found 0 results exceeding regulatory limits.
** Indicates result outside regulatory limits.
* Regulatory limits listed in this document have been obtained from the lastest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.

AGRONOMY

Particle Size Distribution Report



% COBBLES	% GRAVEL	% SAND	% SILT	% CLAY
0.0	3.8	44.8	31.0	20.4

SIEVE SIZE	PERCENT FINER	SPEC.* PERCENT	PASS? (X=NO)
3 in.	100.0		
2 in.	100.0		
1 - 1/2 in.	100.0		
1 in.	100.0		
3/4 in.	100.0		
3/8 in.	100.0		
#4	97.9		
#10	96.2		
#40	87.2		
#100	63.4		
#200	54.3		

* (no specification provided)

Soil Description

Brown loam

Atterberg Limits

PL= LL= PI=

Coefficients

D_{85}= 0.379 D_{60}= 0.123 D_{50}= 0.0441
D_{30}= 0.0071 D_{15}= D_{10}=
C_u= C_c=

Classification

USCS= AASHTO=

Remarks

pH: 5.1 Organic Content: 3.4% Soluble Salts: 480ppm
Magnesium: 20ppa Phosphorus: 150ppa Potassium: 220ppa
USDA Fractions - Sand: 46.6% Silt: 32.1% Clay: 21.3%

Sample No.: 1 **Source of Sample:** **Date:** 01/05/2006
Location: Topsoil received 12/30/2005 **Elev./Depth:**

HILLIS-CARNES

ENGINEERING ASSOCIATES, INC.

Client:
Project: Indian Head
Project No: W03050 **Figure**

June 6, 2006

FSSI/Shaw
Attn: Adam Forshey, Jr.
Naval Surface Warfare Center
Construction Trailer ADJ to Bldg 892
Indian Head, MD 20640

Mr. Forshey,

I, Chuck Seals, verify that the topsoil Farm Services is providing to you is from a virgin borrow source that is free of contaminants. To the best of my knowledge the soil comes from an area that has never stored any hazardous materials/wastes. The soils that are being provided to FSSI/Shaw for this project at Site 57 are of the same type and source as the soils provided for the Olsen Road Landfill.

Please contact me if you have any more questions or concerns. I can be reached by phone at 301-802-2168.

Respectfully,

Chuck Seals
Farm Services

SUBMITTAL PACKAGE TRANSMITTAL FORM

(CONTRACTING OFFICER APPROVAL)

SUBMITTAL PACKAGE TRANSMITTAL FORM - LANTDIV CONTRACT NO. N62470-03-D-4402 (For Transmitting Product Data, Shop Drawings, Material Samples and Administrative Data)	Date 6/23/2006	Transmittal No. 003

SECTION I - REQUEST FOR CONTRACT OFFICER APPROVAL

To:	From:	Project Title: Interim Removal Action at Site 57 - Building 292 TCE Removal	Check One
Navy	FSSI/Shaw	Location: Indian Head, Maryland Task Order No.: 025	☑ Initial Submittal ☐ Re-submittal
Project/Job No.: 115273		Specification Section: Work Plan 3.5	SD Number:

Item No.	Description of Item(s) Submitted	Contract Reference Document		No. of Copies	FOR CO REVIEW ONLY	
		Spec Para No.	Dwg. Sht. No.		ACTION CODE	DATE
003-01	Waste Characterization Analysis - Site 57 Sample No. F41456	3.5	NA	1		

Action Code Comments/Explanation

A - Approved
AN - Approved as Noted
NR - Not Reviewed
RR - Revise & Resubmit
D - Disapproved

(Use Continuation Sheet, if necessary)

Certification Statement: I hearby certify that the equipment, material, or article shown and marked in this submittal is proposed to be incorporated into Contract Number N62470-02-D-4402, is in compliance with the contract drawings and specificaions, can be installed in the allocated spaces, and is submitted for Government approval.

Certified by Submittal Reviewer _____ Date 6/23/06

Certified by QC Manager _____ Date 6/23/06

SECTION II - APPROVAL ACTION (Please provide action code(s) in above review block)

Distribution:

Approving Authority:

Signature _____ Title _____ Date _____

Southeast ACCUTEST Laboratories

IT'S ALL IN THE CHEMISTRY

06/22/06

Technical Report for

Shaw E & I, Inc.

Indian Head

120359

Accutest Job Number: F41456

Sampling Date: 06/14/06

Report to:

Shaw E & I, Inc.

natasha.sullivan@shawgrp.com

ATTN: Natasha Sullivan

Total number of pages in report: 62

ACCUTEST LABORATORIES 50 YEARS 1956-2006

ACCREDITED IN ACCORDANCE WITH nelac

Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

Harry Behzadi, Ph.D.
Laboratory Director

Certifications: FL (DOH E83510), NC (573), NJ (FL002), MA (FL946), IA (366), LA (03051), KS (E-10327), SC, AK

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11.3: Matrix Spike/Matrix Spike Duplicate Summary 62

Sample Summary

Shaw E & I, Inc.

Job No: F41456

Indian Head
Project No: 120359

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
F41456-1	06/14/06	10:15 AF	06/15/06	SO	Soil	120359-DW-SO-001
F41456-1A	06/14/06	10:15 AF	06/15/06	SO	Soil	120359-DW-SO-001

Soil samples reported on a dry weight basis unless otherwise indicated on result page.

Sample Results

Report of Analysis

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-DW-SO-001		
Lab Sample ID:	F41456-1	**Date Sampled:**	06/14/06
Matrix:	SO - Soil	**Date Received:**	06/15/06
Method:	SW846 8015 SW846 5030A	**Percent Solids:**	85.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	CD069578.D	1	06/16/06	MM	06/15/06 11:05	n/a	GCD2867
Run #2							

	Initial Weight	Final Volume	Methanol Aliquot
Run #1	5.00 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	6.28	6.7	3.3	mg/kg	J

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	82%		62-135%
98-08-8	aaa-Trifluorotoluene	92%		65-118%

(a) Sample was received in a bulk container and preserved within 48 hours of sampling.

ND = Not detected MDL - Method Detection Limit
RL = Reporting Limit
E = Indicates value exceeds calibration range

J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-DW-SO-001		
Lab Sample ID:	F41456-1	**Date Sampled:**	06/14/06
Matrix:	SO - Soil	**Date Received:**	06/15/06
Method:	SW846 8082 SW846 3550B	**Percent Solids:**	85.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	DD31853.D	1	06/19/06	ME	06/17/06	OP16941	GDD899
Run #2							

	Initial Weight	Final Volume
Run #1	30.1 g	10.0 ml
Run #2		

PCB List

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	19	9.7	ug/kg	
11104-28-2	Aroclor 1221	ND	19	15	ug/kg	
11141-16-5	Aroclor 1232	ND	19	15	ug/kg	
53469-21-9	Aroclor 1242	ND	19	9.7	ug/kg	
12672-29-6	Aroclor 1248	ND	19	9.7	ug/kg	
11097-69-1	Aroclor 1254	ND	19	9.7	ug/kg	
11096-82-5	Aroclor 1260	ND	19	9.7	ug/kg	
	Total PCBs	ND	39		ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	85%		52-136%
2051-24-3	Decachlorobiphenyl	85%		49-148%

ND = Not detected MDL - Method Detection Limit
RL = Reporting Limit
E = Indicates value exceeds calibration range

J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-DW-SO-001		
Lab Sample ID:	F41456-1	**Date Sampled:**	06/14/06
Matrix:	SO - Soil	**Date Received:**	06/15/06
Method:	SW846 8015 M SW846 3550B	**Percent Solids:**	85.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	LL10833.D	1	06/16/06	VS	06/16/06	OP16926	GLL398
Run #2							

	Initial Weight	Final Volume
Run #1	30.0 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	11.3	9.7	5.8	mg/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
84-15-1	o-Terphenyl	98%		57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

ND = Not detected MDL - Method Detection Limit
RL = Reporting Limit
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-DW-SO-001		
Lab Sample ID:	F41456-1	**Date Sampled:**	06/14/06
Matrix:	SO - Soil	**Date Received:**	06/15/06
		Percent Solids:	85.8
Project:	Indian Head		

General Chemistry

Analyte	Result	RL	Units	DF	Analyzed	By	Method
Corrosivity as pH	6.2			1	06/16/06	CP	SW846 CHAP7
Cyanide Reactivity	< 1.5	1.5	mg/kg	1	06/22/06	SJL	SW846 CHAP7
Ignitability (Flashpoint) [a]	> 200		Deg. F	1	06/15/06	CP	SW846 1010
Solids, Percent	85.8		%	1	06/15/06	EM	EPA 160.3 M
Sulfide Reactivity	< 50	50	mg/kg	1	06/22/06	SJL	SW846 CHAP7

(a) Not ignitable

RL = Reporting Limit

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-DW-SO-001		
Lab Sample ID:	F41456-1A	**Date Sampled:**	06/14/06
Matrix:	SO - Soil	**Date Received:**	06/15/06
Method:	SW846 8260B SW846 1311	**Percent Solids:**	85.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	J023252.D	10	06/16/06	MM	06/15/06	OP16919	VJ956
Run #2							

	Purge Volume
Run #1	5.0 ml
Run #2	

VOA TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
71-43-2	Benzene	ND	D018	0.50	0.010	0.0050	mg/l	
108-90-7	Chlorobenzene	ND	D021	100	0.020	0.0050	mg/l	
67-66-3	Chloroform	ND	D022	6.0	0.020	0.0050	mg/l	
56-23-5	Carbon tetrachloride	ND	D019	0.50	0.020	0.0050	mg/l	
75-35-4	1,1-Dichloroethylene	ND	D029	0.70	0.020	0.0050	mg/l	
107-06-2	1,2-Dichloroethane	ND	D028	0.50	0.020	0.0050	mg/l	
106-46-7	p-Dichlorobenzene	ND	D027	7.5	0.020	0.0050	mg/l	
78-93-3	Methyl ethyl ketone	ND	D035	200	0.10	0.025	mg/l	
127-18-4	Tetrachloroethylene	ND	D039	0.70	0.020	0.0050	mg/l	
79-01-6	Trichloroethylene	0.0274	D040	0.50	0.020	0.0050	mg/l	
75-01-4	Vinyl chloride	ND	D043	0.20	0.010	0.0050	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	105%		86-115%
2037-26-5	Toluene-D8	95%		86-112%
460-00-4	4-Bromofluorobenzene	112%		83-119%
17060-07-0	1,2-Dichloroethane-D4	114%		73-126%

ND = Not detected MDL - Method Detection Limit
MCL = Maximum Contamination Level (40 CFR 261 6/96)
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-DW-SO-001		
Lab Sample ID:	F41456-1A	**Date Sampled:**	06/14/06
Matrix:	SO - Soil	**Date Received:**	06/15/06
Method:	SW846 8270C SW846 3510C	**Percent Solids:**	85.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	R03519.D	1	06/19/06	NJ	06/16/06	OP16933	SR164
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	1.0 ml
Run #2		

ABN TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	D023	200	0.050	0.020	mg/l	
	3&4-Methylphenol	ND	D024	200	0.050	0.020	mg/l	
87-86-5	Pentachlorophenol	ND	D037	100	0.25	0.10	mg/l	
95-95-4	2,4,5-Trichlorophenol	ND	D041	400	0.050	0.020	mg/l	
88-06-2	2,4,6-Trichlorophenol	ND	D042	2.0	0.050	0.020	mg/l	
106-46-7	1,4-Dichlorobenzene	ND	D027	7.5	0.050	0.010	mg/l	
121-14-2	2,4-Dinitrotoluene	ND	D030	0.13	0.050	0.020	mg/l	
118-74-1	Hexachlorobenzene	ND	D032	0.13	0.050	0.010	mg/l	
87-68-3	Hexachlorobutadiene	ND	D033	0.50	0.050	0.020	mg/l	
67-72-1	Hexachloroethane	ND	D034	3.0	0.050	0.020	mg/l	
98-95-3	Nitrobenzene	ND	D036	2.0	0.050	0.010	mg/l	
110-86-1	Pyridine	ND	D038	5.0	0.10	0.030	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
367-12-4	2-Fluorophenol	43%		19-90%
4165-62-2	Phenol-d5	26%		10-68%
118-79-6	2,4,6-Tribromophenol	85%		36-137%
4165-60-0	Nitrobenzene-d5	77%		49-119%
321-60-8	2-Fluorobiphenyl	78%		45-118%
1718-51-0	Terphenyl-d14	83%		46-135%

ND = Not detected MDL - Method Detection Limit
MCL = Maximum Contamination Level (40 CFR 261 6/96)
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-DW-SO-001		
Lab Sample ID:	F41456-1A	**Date Sampled:**	06/14/06
Matrix:	SO - Soil	**Date Received:**	06/15/06
Method:	SW846 8081A SW846 3510C	**Percent Solids:**	85.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	KK13050.D	1	06/16/06	AA	06/16/06	OP16934	GKK492
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Pesticide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	D013	0.40	0.00050	0.00020	mg/l	
12789-03-6	Chlordane	ND	D020	0.030	0.0050	0.0025	mg/l	
72-20-8	Endrin	ND	D012	0.020	0.0010	0.00040	mg/l	
76-44-8	Heptachlor	ND	D031	0.0080	0.00050	0.00020	mg/l	
1024-57-3	Heptachlor epoxide	ND	D031	0.0080	0.00050	0.00020	mg/l	
72-43-5	Methoxychlor	ND	D014	10	0.0010	0.00040	mg/l	
8001-35-2	Toxaphene	ND	D015	0.50	0.025	0.015	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
877-09-8	Tetrachloro-m-xylene	92%		60-138%
2051-24-3	Decachlorobiphenyl	95%		31-148%

ND = Not detected MDL - Method Detection Limit
MCL = Maximum Contamination Level (40 CFR 261 6/96)
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-DW-SO-001		
Lab Sample ID:	F41456-1A	**Date Sampled:**	06/14/06
Matrix:	SO - Soil	**Date Received:**	06/15/06
Method:	SW846 8151 SW846 3510C	**Percent Solids:**	85.8
Project:	Indian Head		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1 [a]	DD56828.D	1	06/21/06	ATX	06/20/06	T:OP6026	T:GDD1060
Run #2							

	Initial Volume	Final Volume
Run #1	100 ml	10.0 ml
Run #2		

Herbicide TCLP Leachate

CAS No.	Compound	Result	HW#	MCL	RL	MDL	Units	Q
94-75-7	2,4-D	ND	D016	10	0.015	0.011	mg/l	
93-72-1	2,4,5-TP (Silvex)	ND	D017	1.0	0.0020	0.00060	mg/l	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
19719-28-9	2,4-DCAA	105%		23-171%

(a) Analysis performed at Accutest Laboratories, Houston, TX.

ND = Not detected MDL - Method Detection Limit
MCL = Maximum Contamination Level (40 CFR 261 6/96)
E = Indicates value exceeds calibration range
J = Indicates an estimated value
B = Indicates analyte found in associated method blank
N = Indicates presumptive evidence of a compound

Accutest Laboratories

Report of Analysis

Client Sample ID:	120359-DW-SO-001		
Lab Sample ID:	F41456-1A	**Date Sampled:**	06/14/06
Matrix:	SO - Soil	**Date Received:**	06/15/06
		Percent Solids:	85.8
Project:	Indian Head		

Metals Analysis, TCLP Leachate SW846 1311

Analyte	Result	HW#	MCL	RL	MDL	Units	DF	Prep	Analyzed	By	Method
Arsenic	0.026 B	D004	5.0	0.040	0.011	mg/l	1	06/16/06	06/19/06	RS	SW846 6010B [2]
Barium	0.38 B	D005	100	1.0	0.20	mg/l	1	06/16/06	06/19/06	RS	SW846 6010B [2]
Cadmium	0.0052	D006	1.0	0.0050	0.00030	mg/l	1	06/16/06	06/19/06	RS	SW846 6010B [2]
Chromium	0.0021 B	D007	5.0	0.010	0.00060	mg/l	1	06/16/06	06/19/06	RS	SW846 6010B [2]
Lead	0.22	D008	5.0	0.050	0.0017	mg/l	1	06/16/06	06/19/06	RS	SW846 6010B [2]
Mercury	0.0010 U	D009	0.20	0.010	0.0010	mg/l	1	06/16/06	06/16/06	MS	SW846 7470A [1]
Selenium	0.040 U	D010	1.0	0.10	0.040	mg/l	1	06/16/06	06/19/06	RS	SW846 6010B [2]
Silver	0.0015 B	D011	5.0	0.010	0.00090	mg/l	1	06/16/06	06/19/06	RS	SW846 6010B [2]

(1) Instrument QC Batch: MA5036
(2) Instrument QC Batch: MA5040
(3) Prep QC Batch: MP9776
(4) Prep QC Batch: MP9779

RL = Reporting Limit MDL = Method Detection Limit U = Indicates a result < MDL
MCL = Maximum Contamination Level (40 CFR 261 6/96) B = Indicates a result > = MDL but < RL

Misc. Forms

Custody Documents and Other Forms

Includes the following where applicable:

- Chain of Custody

F41456

CHAIN-OF-CUSTODY RECORD

COC Number: 120359-Date
Purchase Order Number:

Shaw® The Shaw Group Inc.®

SHAW Environmental & Infrastructure, INC. - 5700 Thurston Ave Suite 116B - Virginia Beach, VA 23455 - (757) 363-7190

Lab Destination	Lab Receiving Address	Analysis Desired
Accutest	4405 Vineland Road Suite C-1, Orlando FL 32811 (407)425-6700	

Project Name	Sample Location
Indian Head Site 57	Disposal Samples

Project Number	Shaw Contact	Shaw Contact Number
120359	Natasha Kelley Sullivan	(410)529-7598

Client Rep	Project Manager
LANTDIV	Steve Carriere

Item No.	Sample Number	Date	Time	Water	Soil	Sample Description	Number of Containers	Full TCLP+RCRA SW-846	TPH DRO/GRO SW-846 8015M	PCBs SW-846 8082
1	120359-DW-SO-001	6/14/06	10:15		X	Disposal Sample		X	X	X
2										
3										
4										
5										
6										
7										
8										
9										
10										

6/14/06

Turnaround Time Required:	Sampled By:	COMMENTS:	Laboratory Report No.:
☑ 1 Week TAT	Adam Forshey, SHAW		

Transfer Number	Transfers Relinquished By	Date	Time	Transfers Accepted By	Date	Time	Remarks
1	Adam Forshey	6/14/06	10:15	FX			Summary Report
2	FX			ALSC	6/15/06	1400	Deliverables: EDD Excel
3							*** Fax results to Natasha Sullivan (410) 529-7599
4							

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F41456: Chain of Custody
Page 1 of 2

ACCUTEST LABORATORIES SAMPLE RECEIPT CONFIRMATION

ACCUTEST'S JOB NUMBER: F41456 CLIENT: Shaw PROJECT: Indian Head Site 57

DATE/TIME RECEIVED: 6/15/06 9:00 # OF COOLERS RECEIVED: 1 COOLER TEMPS: 1.8

METHOD OF DELIVERY: (FEDEX) UPS ACCUTEST COURIER GREYHOUND DELIVERY OTHER

AIRBILL NUMBERS: 8545910 2478

COOLER INFORMATION

- [ ] CUSTODY SEAL NOT PRESENT OR NOT INTACT
- [ ] CHAIN OF CUSTODY NOT RECEIVED (COC)
- [ ] ANALYSIS REQUESTED IS UNCLEAR OR MISSING
- [ ] SAMPLE DATES OR TIMES UNCLEAR OR MISSING
- [ ] TEMPERATURE CRITERIA NOT MET

TRIP BLANK INFORMATION

- [x] TRIP BLANK NOT PROVIDED
- [x] TRIP BLANK NOT ON COC
- [ ] TRIP BLANK INTACT
- [ ] TRIP BLANK NOT INTACT
- [ ] RECEIVED WATER TRIP BLANK
- [ ] RECEIVED SOIL TRIP BLANK

SAMPLE INFORMATION

- [ ] SAMPLE LABELS PRESENT ON ALL BOTTLES
- [ ] CORRECT NUMBER OF CONTAINERS USED
- [ ] SAMPLE RECEIVED IMPROPERLY PRESERVED
- [ ] INSUFFICIENT VOLUME FOR ANALYSIS
- [ ] TIMES ON COC DON'T MATCH LABEL
- [ ] ID'S ON COC DON'T MATCH LABEL
- [ ] VOC VIALS HAVE HEADSPACE (MACRO BUBBLES)
- [ ] BOTTLES RECEIVED BUT ANALYSIS NOT REQUESTED
- [ ] NO BOTTLES RECEIVED FOR ANALYSIS REQUESTED
- [ ] UNCLEAR FILTERING INSTRUCTIONS
- [ ] UNCLEAR COMPOSITING INSTRUCTIONS
- [ ] SAMPLE CONTAINER(S) RECEIVED BROKEN
- [ ] % SOLIDS JAR NOT RECEIVED
- [ ] 5035 FIELD KIT FROZEN WITHIN 48 HOUR'S

MISC. INFORMATION

NUMBER OF ENCORES ? X

NUMBER OF 5035 FIELD KITS ? X

NUMBER OR LAB FILTERED METALS ? X

SUMMARY OF COMMENTS:

TECHNICIAN SIGNATURE/DATE [signature] 6/15/06 TECHNICIAN SIGNATURE/DATE

3.1 3

F41456: Chain of Custody
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GC/MS Volatiles

QC Data Summaries

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Leachate Blank Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16919-LB	J023249.D	10	06/16/06	MM	06/15/06	OP16919	VJ956

The QC reported here applies to the following samples: **Method:** SW846 8260B

F41456-1A

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	10	5.0	ug/l	
108-90-7	Chlorobenzene	ND	20	5.0	ug/l	
67-66-3	Chloroform	ND	20	5.0	ug/l	
56-23-5	Carbon tetrachloride	ND	20	5.0	ug/l	
75-35-4	1,1-Dichloroethylene	ND	20	5.0	ug/l	
107-06-2	1,2-Dichloroethane	ND	20	5.0	ug/l	
106-46-7	p-Dichlorobenzene	ND	20	5.0	ug/l	
78-93-3	Methyl ethyl ketone	ND	100	25	ug/l	
127-18-4	Tetrachloroethylene	ND	20	5.0	ug/l	
79-01-6	Trichloroethylene	ND	20	5.0	ug/l	
75-01-4	Vinyl chloride	ND	10	5.0	ug/l	

CAS No.	Surrogate Recoveries		Limits
1868-53-7	Dibromofluoromethane	105%	86-115%
17060-07-0	1,2-Dichloroethane-D4	112%	73-126%
2037-26-5	Toluene-D8	94%	86-112%
460-00-4	4-Bromofluorobenzene	109%	83-119%

Blank Spike Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VJ956-BS	J023247.D	10	06/16/06	MM	n/a	n/a	VJ956

The QC reported here applies to the following samples: **Method:** SW846 8260B

F41456-1A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
71-43-2	Benzene	250	274	110	80-120
108-90-7	Chlorobenzene	250	250	100	82-112
67-66-3	Chloroform	250	257	103	78-118
56-23-5	Carbon tetrachloride	250	258	103	69-137
75-35-4	1,1-Dichloroethylene	250	258	103	67-134
107-06-2	1,2-Dichloroethane	250	260	104	68-121
106-46-7	p-Dichlorobenzene	250	239	96	77-113
78-93-3	Methyl ethyl ketone	1250	1220	98	58-127
127-18-4	Tetrachloroethylene	250	193	77	75-126
79-01-6	Trichloroethylene	250	260	104	80-115
75-01-4	Vinyl chloride	250	369	148	70-151

CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	99%	86-115%
17060-07-0	1,2-Dichloroethane-D4	103%	73-126%
2037-26-5	Toluene-D8	93%	86-112%
460-00-4	4-Bromofluorobenzene	97%	83-119%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41363-1MS	J023256.D	10	06/16/06	MM	n/a	n/a	VJ956
F41363-1MSD	J023257.D	10	06/16/06	MM	n/a	n/a	VJ956
F41363-1	J023253.D	10	06/16/06	MM	06/12/06	OP16869	VJ956

The QC reported here applies to the following samples: **Method:** SW846 8260B

F41456-1A

CAS No.	Compound	F41363-1 ug/l	Q	Spike ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
71-43-2	Benzene	10 U		250	274	110	263	105	4	72-125/7
108-90-7	Chlorobenzene	20 U		250	239	96	235	94	2	79-113/7
67-66-3	Chloroform	20 U		250	276	110	261	104	6	75-120/8
56-23-5	Carbon tetrachloride	20 U		250	281	112	265	106	6	56-145/12
75-35-4	1,1-Dichloroethylene	20 U		250	281	112	262	105	7	61-137/15
107-06-2	1,2-Dichloroethane	20 U		250	299	120	276	110	8*	64-124/7
106-46-7	p-Dichlorobenzene	20 U		250	235	94	233	93	1	74-112/7
78-93-3	Methyl ethyl ketone	100 U		1250	1260	101	1270	102	1	51-128/10
127-18-4	Tetrachloroethylene	20 U		250	181	72	190	76	5	70-126/9
79-01-6	Trichloroethylene	20 U		250	266	106	260	104	2	73-117/10
75-01-4	Vinyl chloride	10 U		250	350	140	377	151	7	63-161/18

CAS No.	Surrogate Recoveries	MS	MSD	F41363-1	Limits
1868-53-7	Dibromofluoromethane	104%	101%	110%	86-115%
17060-07-0	1,2-Dichloroethane-D4	125%	117%	123%	73-126%
2037-26-5	Toluene-D8	89%	92%	97%	86-112%
460-00-4	4-Bromofluorobenzene	96%	98%	111%	83-119%

Duplicate Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41456-1ADUP	J023255.D	10	06/16/06	MM	n/a	n/a	VJ956
F41456-1A	J023252.D	10	06/16/06	MM	06/15/06	OP16919	VJ956

The QC reported here applies to the following samples: **Method:** SW846 8260B

F41456-1A

CAS No.	Compound	F41456-1A ug/l	Q	DUP ug/l	Q	RPD	Limits
71-43-2	Benzene	ND		ND		nc	
108-90-7	Chlorobenzene	ND		ND		nc	
67-66-3	Chloroform	ND		ND		nc	
56-23-5	Carbon tetrachloride	ND		ND		nc	
75-35-4	1,1-Dichloroethylene	ND		ND		nc	
107-06-2	1,2-Dichloroethane	ND		ND		nc	
106-46-7	p-Dichlorobenzene	ND		ND		nc	
78-93-3	Methyl ethyl ketone	ND		ND		nc	
127-18-4	Tetrachloroethylene	ND		ND		nc	
79-01-6	Trichloroethylene	27.4		27.0		1	
75-01-4	Vinyl chloride	ND		ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41456-1A	Limits
1868-53-7	Dibromofluoromethane	110%	105%	86-115%
17060-07-0	1,2-Dichloroethane-D4	119%	114%	73-126%
2037-26-5	Toluene-D8	96%	95%	86-112%
460-00-4	4-Bromofluorobenzene	116%	112%	83-119%

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GC/MS Semi-volatiles

QC Data Summaries

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Leachate Blank Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16933-LB	R03515.D	1	06/19/06	NJ	06/16/06	OP16933	SR164

The QC reported here applies to the following samples: **Method:** SW846 8270C

F41456-1A

CAS No.	Compound	Result	RL	MDL	Units	Q
95-48-7	2-Methylphenol	ND	50	20	ug/l	
	3&4-Methylphenol	ND	50	20	ug/l	
87-86-5	Pentachlorophenol	ND	250	100	ug/l	
95-95-4	2,4,5-Trichlorophenol	ND	50	20	ug/l	
88-06-2	2,4,6-Trichlorophenol	ND	50	20	ug/l	
106-46-7	1,4-Dichlorobenzene	ND	50	10	ug/l	
121-14-2	2,4-Dinitrotoluene	ND	50	20	ug/l	
118-74-1	Hexachlorobenzene	ND	50	10	ug/l	
87-68-3	Hexachlorobutadiene	ND	50	20	ug/l	
67-72-1	Hexachloroethane	ND	50	20	ug/l	
98-95-3	Nitrobenzene	ND	50	10	ug/l	
110-86-1	Pyridine	ND	100	30	ug/l	

CAS No.	Surrogate Recoveries		Limits
367-12-4	2-Fluorophenol	46%	19-90%
4165-62-2	Phenol-d5	29%	10-68%
118-79-6	2,4,6-Tribromophenol	80%	36-137%
4165-60-0	Nitrobenzene-d5	72%	49-119%
321-60-8	2-Fluorobiphenyl	76%	45-118%
1718-51-0	Terphenyl-d14	81%	46-135%

Blank Spike Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16933-LBS	R03514.D	1	06/19/06	NJ	06/16/06	OP16933	SR164

The QC reported here applies to the following samples: **Method:** SW846 8270C

F41456-1A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
95-48-7	2-Methylphenol	500	384	77	48-90
	3&4-Methylphenol	1000	717	72	43-94
87-86-5	Pentachlorophenol	1000	907	91	62-120
95-95-4	2,4,5-Trichlorophenol	500	467	93	67-103
88-06-2	2,4,6-Trichlorophenol	500	466	93	68-104
106-46-7	1,4-Dichlorobenzene	500	409	82	46-96
121-14-2	2,4-Dinitrotoluene	500	480	96	64-107
118-74-1	Hexachlorobenzene	500	485	97	69-103
87-68-3	Hexachlorobutadiene	500	475	95	48-100
67-72-1	Hexachloroethane	500	417	83	41-98
98-95-3	Nitrobenzene	500	475	95	60-102
110-86-1	Pyridine	500	237	47	17-65

CAS No.	Surrogate Recoveries	BSP	Limits
367-12-4	2-Fluorophenol	58%	19-90%
4165-62-2	Phenol-d5	38%	10-68%
118-79-6	2,4,6-Tribromophenol	100%	36-137%
4165-60-0	Nitrobenzene-d5	94%	49-119%
321-60-8	2-Fluorobiphenyl	96%	45-118%
1718-51-0	Terphenyl-d14	97%	46-135%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16933-MS	R03517.D	1	06/19/06	NJ	06/16/06	OP16933	SR164
OP16933-MSD	R03518.D	1	06/19/06	NJ	06/16/06	OP16933	SR164
F41403-1A	R03516.D	1	06/19/06	NJ	06/16/06	OP16933	SR164

The QC reported here applies to the following samples: **Method:** SW846 8270C

F41456-1A

CAS No.	Compound	F41403-1A ug/l	Q	Spike ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
95-48-7	2-Methylphenol	ND		500	362	72	334	67	8	40-102/25
	3&4-Methylphenol	ND		1000	660	66	603	60	9	39-97/24
87-86-5	Pentachlorophenol	ND		1000	820	82	859	86	5	53-128/22
95-95-4	2,4,5-Trichlorophenol	ND		500	444	89	436	87	2	56-110/19
88-06-2	2,4,6-Trichlorophenol	ND		500	446	89	437	87	2	55-112/19
106-46-7	1,4-Dichlorobenzene	ND		500	371	74	364	73	2	43-102/24
121-14-2	2,4-Dinitrotoluene	ND		500	461	92	455	91	1	60-108/18
118-74-1	Hexachlorobenzene	ND		500	471	94	465	93	1	66-106/16
87-68-3	Hexachlorobutadiene	ND		500	413	83	387	77	7	46-107/26
67-72-1	Hexachloroethane	ND		500	369	74	347	69	6	39-105/25
98-95-3	Nitrobenzene	ND		500	458	92	449	90	2	50-107/25
110-86-1	Pyridine	ND		500	242	48	210	42	14	19-77/41

CAS No.	Surrogate Recoveries	MS	MSD	F41403-1A	Limits
367-12-4	2-Fluorophenol	54%	47%	42%	19-90%
4165-62-2	Phenol-d5	35%	29%	26%	10-68%
118-79-6	2,4,6-Tribromophenol	94%	95%	87%	36-137%
4165-60-0	Nitrobenzene-d5	92%	88%	78%	49-119%
321-60-8	2-Fluorobiphenyl	91%	90%	78%	45-118%
1718-51-0	Terphenyl-d14	89%	89%	83%	46-135%

Duplicate Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16933-DUP	R03520.D	1	06/19/06	NJ	06/16/06	OP16933	SR164
F41456-1A	R03519.D	1	06/19/06	NJ	06/16/06	OP16933	SR164

The QC reported here applies to the following samples: **Method:** SW846 8270C

F41456-1A

CAS No.	Compound	F41456-1A ug/l	Q	DUP ug/l	Q	RPD	Limits
95-48-7	2-Methylphenol	ND		ND		nc	
	3&4-Methylphenol	ND		ND		nc	
87-86-5	Pentachlorophenol	ND		ND		nc	
95-95-4	2,4,5-Trichlorophenol	ND		ND		nc	
88-06-2	2,4,6-Trichlorophenol	ND		ND		nc	
106-46-7	1,4-Dichlorobenzene	ND		ND		nc	
121-14-2	2,4-Dinitrotoluene	ND		ND		nc	
118-74-1	Hexachlorobenzene	ND		ND		nc	
87-68-3	Hexachlorobutadiene	ND		ND		nc	
67-72-1	Hexachloroethane	ND		ND		nc	
98-95-3	Nitrobenzene	ND		ND		nc	
110-86-1	Pyridine	ND		ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41456-1A	Limits
367-12-4	2-Fluorophenol	46%	43%	19-90%
4165-62-2	Phenol-d5	29%	26%	10-68%
118-79-6	2,4,6-Tribromophenol	88%	85%	36-137%
4165-60-0	Nitrobenzene-d5	81%	77%	49-119%
321-60-8	2-Fluorobiphenyl	81%	78%	45-118%
1718-51-0	Terphenyl-d14	88%	83%	46-135%

GC Volatiles

QC Data Summaries

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Method Blank Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GCD2867-MB	CD069574.D	1	06/16/06	MM	n/a	n/a	GCD2867

The QC reported here applies to the following samples: **Method:** SW846 8015

F41456-1

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.0	2.5	mg/kg	

CAS No.	Surrogate Recoveries		Limits
460-00-4	4-Bromofluorobenzene	84%	62-135%
98-08-8	aaa-Trifluorotoluene	90%	65-118%

Blank Spike Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
GCD2867-BS	CD069573.D	1	06/16/06	MM	n/a	n/a	GCD2867

The QC reported here applies to the following samples: **Method:** SW846 8015

F41456-1

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH-GRO (C6-C10)	20	19.6	98	66-122

CAS No.	Surrogate Recoveries	BSP	Limits
460-00-4	4-Bromofluorobenzene	97%	62-135%
98-08-8	aaa-Trifluorotoluene	99%	65-118%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
F41435-1MS	CD069579.D	1	06/16/06	MM	n/a	n/a	GCD2867
F41435-1MSD	CD069580.D	1	06/16/06	MM	n/a	n/a	GCD2867
F41435-1 [a]	CD069576.D	1	06/16/06	MM	n/a	n/a	GCD2867

The QC reported here applies to the following samples: **Method:** SW846 8015

F41456-1

CAS No.	Compound	F41435-1 mg/kg	Q	Spike mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH-GRO (C6-C10)	ND		25.1	24.6	98	24.0	96	2	37-142/17

CAS No.	Surrogate Recoveries	MS	MSD	F41435-1	Limits
460-00-4	4-Bromofluorobenzene	93%	99%	82%	62-135%
98-08-8	aaa-Trifluorotoluene	98%	100%	84%	65-118%

(a) Sample was received in a bulk container and preserved within 48 hours of sampling.

GC Semi-volatiles

QC Data Summaries

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Method Blank Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16941-MB	DD31852.D	1	06/19/06	ME	06/17/06	OP16941	GDD899

The QC reported here applies to the following samples: **Method:** SW846 8082

F41456-1

7.1

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CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	88%	52-136%
2051-24-3	Decachlorobiphenyl	102%	49-148%

Method Blank Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16941-MB	ST48345.D	1	06/20/06	ME	06/17/06	OP16941	GST1413

The QC reported here applies to the following samples: **Method:** SW846 8082

F41456-1

CAS No.	Compound	Result	RL	MDL	Units	Q
12674-11-2	Aroclor 1016	ND	17	8.3	ug/kg	
11104-28-2	Aroclor 1221	ND	17	13	ug/kg	
11141-16-5	Aroclor 1232	ND	17	13	ug/kg	
53469-21-9	Aroclor 1242	ND	17	8.3	ug/kg	
12672-29-6	Aroclor 1248	ND	17	8.3	ug/kg	
11097-69-1	Aroclor 1254	ND	17	8.3	ug/kg	
11096-82-5	Aroclor 1260	ND	17	8.3	ug/kg	
	Total PCBs	ND	33		ug/kg	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	83%	52-136%
2051-24-3	Decachlorobiphenyl	104%	49-148%

Method Blank Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16926-MB	LL10828.D	1	06/16/06	VS	06/16/06	OP16926	GLL398

The QC reported here applies to the following samples: **Method:** SW846 8015 M

F41456-1

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries		Limits
84-15-1	o-Terphenyl	102%	57-115%

7.1

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Method Blank Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16926-MB	LL10859.D	1	06/17/06	AA	06/16/06	OP16926	GLL399

The QC reported here applies to the following samples: **Method:** SW846 8015 M

F41456-1

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	8.3	5.0	mg/kg	

CAS No.	Surrogate Recoveries		Limits
84-15-1	o-Terphenyl	104%	57-115%

Leachate Blank Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16934-LB	KK13046.D	1	06/16/06	AA	06/16/06	OP16934	GKK492

The QC reported here applies to the following samples: **Method:** SW846 8081A

F41456-1A

CAS No.	Compound	Result	RL	MDL	Units	Q
58-89-9	gamma-BHC (Lindane)	ND	0.50	0.20	ug/l	
12789-03-6	Chlordane	ND	5.0	2.5	ug/l	
72-20-8	Endrin	ND	1.0	0.40	ug/l	
76-44-8	Heptachlor	ND	0.50	0.20	ug/l	
1024-57-3	Heptachlor epoxide	ND	0.50	0.20	ug/l	
72-43-5	Methoxychlor	ND	1.0	0.40	ug/l	
8001-35-2	Toxaphene	ND	25	15	ug/l	

CAS No.	Surrogate Recoveries		Limits
877-09-8	Tetrachloro-m-xylene	93%	60-138%
2051-24-3	Decachlorobiphenyl	99%	31-148%

Blank Spike Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16934-LBS	KK13045.D	1	06/16/06	AA	06/16/06	OP16934	GKK492

The QC reported here applies to the following samples: **Method:** SW846 8081A

F41456-1A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
58-89-9	gamma-BHC (Lindane)	5	4.8	96	69-137
72-20-8	Endrin	5	4.7	94	78-134
76-44-8	Heptachlor	5	4.7	94	62-137
1024-57-3	Heptachlor epoxide	5	4.6	92	74-130
72-43-5	Methoxychlor	5	5.6	112	77-131

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	91%	60-138%
2051-24-3	Decachlorobiphenyl	96%	31-148%

Blank Spike Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16941-BS	DD31851.D	1	06/19/06	ME	06/17/06	OP16941	GDD899

The QC reported here applies to the following samples: **Method:** SW846 8082

F41456-1

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	Limits
12674-11-2	Aroclor 1016	133	124	93	75-123
11096-82-5	Aroclor 1260	133	132	99	72-124

CAS No.	Surrogate Recoveries	BSP	Limits
877-09-8	Tetrachloro-m-xylene	96%	52-136%
2051-24-3	Decachlorobiphenyl	104%	49-148%

7.3

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Blank Spike Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16926-BS	LL10827.D	1	06/16/06	VS	06/16/06	OP16926	GLL398

The QC reported here applies to the following samples: **Method:** SW846 8015 M

F41456-1

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	Limits
	TPH (C10-C28)	33.3	28.8	86	62-114

CAS No.	Surrogate Recoveries	BSP	Limits
84-15-1	o-Terphenyl	107%	57-115%

7.3

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Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16934-MS	KK13048.D	1	06/16/06	AA	06/16/06	OP16934	GKK492
OP16934-MSD	KK13049.D	1	06/16/06	AA	06/16/06	OP16934	GKK492
F41403-1A	KK13047.D	1	06/16/06	AA	06/16/06	OP16934	GKK492

The QC reported here applies to the following samples: **Method:** SW846 8081A

F41456-1A

CAS No.	Compound	F41403-1A ug/l	Q	Spike ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
58-89-9	gamma-BHC (Lindane)	ND		5	4.8	96	5.3	106	10	75-140/21
72-20-8	Endrin	ND		5	4.7	94	5.1	102	8	72-149/21
76-44-8	Heptachlor	ND		5	4.8	96	5.2	104	8	74-136/25
1024-57-3	Heptachlor epoxide	ND		5	4.5	90	5.0	100	11	75-138/21
72-43-5	Methoxychlor	ND		5	5.6	112	6.1	122	9	69-145/27

CAS No.	Surrogate Recoveries	MS	MSD	F41403-1A	Limits
877-09-8	Tetrachloro-m-xylene	92%	98%	90%	60-138%
2051-24-3	Decachlorobiphenyl	100%	107%	92%	31-148%

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16941-MS	DD31865.D	1	06/19/06	ME	06/17/06	OP16941	GDD899
OP16941-MSD	DD31866.D	1	06/19/06	ME	06/17/06	OP16941	GDD899
F41379-9 [a]	DD31864.D	1	06/19/06	ME	06/17/06	OP16941	GDD899

The QC reported here applies to the following samples: **Method:** SW846 8082

F41456-1

CAS No.	Compound	F41379-9 ug/kg	Q	Spike ug/kg	MS ug/kg	MS %	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
12674-11-2	Aroclor 1016	18 U		143	121	85	123	86	2	54-138/22
11096-82-5	Aroclor 1260	90.6	J	143	199	76	204	79	2	46-138/21

CAS No.	Surrogate Recoveries	MS	MSD	F41379-9	Limits
877-09-8	Tetrachloro-m-xylene	80%	82%	89%	52-136%
2051-24-3	Decachlorobiphenyl	94%	97%	99%	49-148%

(a) All hits confirmed by dual column analysis.

7.4

7

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16926-MS	LL10831.D	1	06/16/06	VS	06/16/06	OP16926	GLL398
OP16926-MSD	LL10832.D	1	06/16/06	VS	06/16/06	OP16926	GLL398
F41435-2 [a]	LL10830.D	1	06/16/06	VS	06/16/06	OP16926	GLL398

The QC reported here applies to the following samples: **Method:** SW846 8015 M

F41456-1

CAS No.	Compound	F41435-2 mg/kg	Q	Spike mg/kg	MS mg/kg	MS %	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	25.2		38	54.6	77	56.6	83	4	31-136/36

CAS No.	Surrogate Recoveries	MS	MSD	F41435-2	Limits
84-15-1	o-Terphenyl	90%	97%	93%	57-115%

(a) Petroleum hydrocarbon pattern extends beyond C28.

7.4 7

Duplicate Summary

Job Number: F41456
Account: ITVAVAB Shaw E & I, Inc.
Project: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP16934-DUP	KK13051.D	1	06/16/06	AA	06/16/06	OP16934	GKK492
F41456-1A	KK13050.D	1	06/16/06	AA	06/16/06	OP16934	GKK492

The QC reported here applies to the following samples: **Method:** SW846 8081A

F41456-1A

CAS No.	Compound	F41456-1A ug/l	Q	DUP ug/l	Q	RPD	Limits
58-89-9	gamma-BHC (Lindane)	ND		ND		nc	
12789-03-6	Chlordane	ND		ND		nc	
72-20-8	Endrin	ND		ND		nc	
76-44-8	Heptachlor	ND		ND		nc	
1024-57-3	Heptachlor epoxide	ND		ND		nc	
72-43-5	Methoxychlor	ND		ND		nc	
8001-35-2	Toxaphene	ND		ND		nc	

CAS No.	Surrogate Recoveries	DUP	F41456-1A	Limits
877-09-8	Tetrachloro-m-xylene	91%	92%	60-138%
2051-24-3	Decachlorobiphenyl	102%	95%	31-148%

7.5

7

Metals Analysis

QC Data Summaries

Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY
Part 2 - Method Blanks

Login Number: F41456
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9776
Matrix Type: LEACHATE

Methods: SW846 7470A
Units: mg/l

Prep Date:			06/16/06		06/16/06		06/16/06	
Metal	RL	IDL	MB raw	final	MB raw	final	MB raw	final
Mercury	0.0010	.00008	-0.0000040	<0.0010	0.00010	<0.010	-0.00030	<0.010

Associated samples MP9776: F41456-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

8.1.1

8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41456
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9776
Matrix Type: LEACHATE

Methods: SW846 7470A
Units: mg/l

Prep Date: 06/16/06 06/16/06

Metal	F41365-1 Original	DUP	RPD	QC Limits	F41365-1 Original	MS	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0	0.0	NC	0-20	0.0	0.031	0.030	103.3	80-120

Associated samples MP9776: F41456-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(N) Matrix Spike Rec. outside of QC limits
(anr) Analyte not requested

8.1.2

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41456
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9776
Matrix Type: LEACHATE

Methods: SW846 7470A
Units: mg/l

Prep Date:	06/16/06				06/16/06			
Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.0030	0.0030	100.0	80-120	0.030	0.030	100.0	80-120

Associated samples MP9776: F41456-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

8.1.3

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41456
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9776
Matrix Type: LEACHATE

Methods: SW846 7470A
Units: mg/l

Prep Date: 06/16/06

Metal	BSP Result	Spikelot HGFLWS1	% Rec	QC Limits
Mercury	0.029	0.030	96.7	80-120

Associated samples MP9776: F41456-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

8.1.3

8

BLANK RESULTS SUMMARY
Part 2 - Method Blanks

Login Number: F41456
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9779
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: mg/l

Prep Date:			06/16/06		06/16/06	
Metal	RL	IDL	MB raw	final	MB raw	final
Aluminum	0.20	.018				
Antimony	0.0060	.0034				
Arsenic	0.040	.0028	0.0014	<0.040	-0.015	<0.040
Barium	1.0	.0004	0.00012	<1.0	0.0017	<1.0
Beryllium	0.0050	.0004				
Cadmium	0.0050	.0002	0.00010	<0.0050	-0.00023	<0.0050
Calcium	5.0	.042				
Chromium	0.010	.0006	0.00076	<0.010	0.0039	<0.010
Cobalt	0.050	.0006				
Copper	0.025	.0009				
Iron	0.30	.012				
Lead	0.050	.0017	0.0013	<0.050	0.0012	<0.050
Magnesium	5.0	.0043				
Manganese	0.015	.0006				
Molybdenum	0.050	.0013				
Nickel	0.040	.0008				
Potassium	10	.01				
Selenium	0.10	.002	-0.00058	<0.10	0.031	<0.10
Silver	0.010	.0009	0.00046	<0.010	0.0012	<0.010
Sodium	10	.5				
Thallium	0.010	.0023				
Tin	0.050	.0031				
Vanadium	0.050	.0006				
Zinc	0.10	.0013				

Associated samples MP9779: F41456-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

8.2.1

8

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: F41456
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9779
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: mg/l

Prep Date:			06/16/06				06/16/06		
Metal	F41403-1A Original	DUP	RPD	QC Limits	F41403-1A Original	MS	Spikelot MPFLICP1	% Rec	QC Limits
Aluminum									
Antimony									
Arsenic	0.0	0.0	NC	0-20	0.0	2.1	2.0	105.0	80-120
Barium	0.39	0.39	0.0	0-20	0.39	2.4	2.0	100.5	80-120
Beryllium									
Cadmium	0.0	0.0	NC	0-20	0.0	0.050	0.050	100.0	80-120
Calcium									
Chromium	0.0025	0.0027	7.7	0-20	0.0025	0.20	0.20	98.8	80-120
Cobalt									
Copper									
Iron									
Lead	0.0095	0.0082	14.7	0-20	0.0095	0.51	0.50	100.1	80-120
Magnesium									
Manganese									
Molybdenum									
Nickel									
Potassium									
Selenium	0.035	0.035	0.0	0-20	0.035	2.4	2.0	118.3	80-120
Silver	0.0	0.0	NC	0-20	0.0	0.059	0.050	118.0	80-120
Sodium									
Thallium									
Tin									
Vanadium									
Zinc									

Associated samples MP9779: F41456-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(N) Matrix Spike Rec. outside of QC limits
(anr) Analyte not requested

8.2.2

8

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: F41456
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9779
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: mg/l

Prep Date:	06/16/06				06/16/06			
Metal	BSP Result	Spikelot MPFLICP1	% Rec	QC Limits	BSP Result	Spikelot MPFLICP1	% Rec	QC Limits
Aluminum								
Antimony								
Arsenic	2.1	2.0	105.0	80-120	2.1	2.0	105.0	80-120
Barium	2.1	2.0	105.0	80-120	2.1	2.0	105.0	80-120
Beryllium								
Cadmium	0.052	0.050	104.0	80-120	0.050	0.050	100.0	80-120
Calcium								
Chromium	0.21	0.20	105.0	80-120	0.20	0.20	100.0	80-120
Cobalt								
Copper								
Iron								
Lead	0.52	0.50	104.0	80-120	0.51	0.50	102.0	80-120
Magnesium								
Manganese								
Molybdenum								
Nickel								
Potassium								
Selenium	2.1	2.0	105.0	80-120	2.4	2.0	120.0	80-120
Silver	0.053	0.050	106.0	80-120	0.058	0.050	116.0	80-120
Sodium								
Thallium								
Tin								
Vanadium								
Zinc								

Associated samples MP9779: F41456-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested

8.2.3

8

SERIAL DILUTION RESULTS SUMMARY

Login Number: F41456
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

QC Batch ID: MP9779
Matrix Type: LEACHATE

Methods: SW846 6010B
Units: ug/l

Prep Date: 06/16/06

Metal	F41403-1A Original	SDL 1:5	RPD	QC Limits
Aluminum				
Antimony				
Arsenic	0.00	0.00	NC	0-10
Barium	386	431	11.8*(a)	0-10
Beryllium				
Cadmium	0.00	0.00	NC	0-10
Calcium				
Chromium	2.46	4.67	89.8 (b)	0-10
Cobalt				
Copper				
Iron				
Lead	9.50	0.00	100.0(b)	0-10
Magnesium				
Manganese				
Molybdenum				
Nickel				
Potassium				
Selenium	34.9	39.1	12.1 (b)	0-10
Silver	0.00	0.00	NC	0-10
Sodium				
Thallium				
Tin				
Vanadium				
Zinc				

Associated samples MP9779: F41456-1A

Results < IDL are shown as zero for calculation purposes
(*) Outside of QC limits
(anr) Analyte not requested
(a) Serial dilution indicates possible matrix interference.
(b) Percent difference acceptable due to low initial sample concentration (< 50 times IDL).

General Chemistry

QC Data Summaries

Includes the following where applicable:

- Method Blank and Blank Spike Summaries
- Duplicate Summaries
- Matrix Spike Summaries

METHOD BLANK AND SPIKE RESULTS SUMMARY
GENERAL CHEMISTRY

Login Number: F41456
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

Analyte	Batch ID	RL	MB Result	Units	Spike Amount	BSP Result	BSP %Recov	QC Limits
Cyanide Reactivity	GP8011/GN21077			mg/kg	xxxxxxxx		*(a)	0-100%
Sulfide Reactivity	GP8012/GN21078			mg/kg	xxxxxxxx		*(a)	0-100%

Associated Samples:
Batch GP8011: F41456-1
Batch GP8012: F41456-1
(a) **** RESULTS NOT YET APPROVED BY LABORATORY; DO NOT REPORT ***

9.1

6

DUPLICATE RESULTS SUMMARY
GENERAL CHEMISTRY

Login Number: F41456
Account: ITVAVAB - Shaw E & I, Inc.
Project: Indian Head

Analyte	Batch ID	QC Sample	Units	Original Result	DUP Result	RPD	QC Limits
Corrosivity as pH	GN21029	F41456-1		6.2	6.3		0-%
Ignitability (Flashpoint)	GN21008	F41365-1	Deg. F	>200	0(a)	0.0	0-38%
Solids, Percent	GN21011	F41438-5	%	81.4	81.2	0.2	0-30%

Associated Samples:
Batch GN21008: F41456-1
Batch GN21011: F41456-1
Batch GN21029: F41456-1
(a) Not ignitable.

9.2
9

Misc. Forms

Custody Documents and Other Forms

(Accutest Laboratories Gulf Coast, Inc.)

Includes the following where applicable:

- Chain of Custody

ACCUTEST Laboratories

CHAIN OF CUSTODY

4405 VINELAND ROAD • SUITE C-15
ORLANDO, FL 32811
TEL: 407-425-6700 • FAX: 407-425-0707

ACCUTEST JOB #:

ACCUTEST QUOTE #:

CLIENT INFORMATION

NAME: Accutest Southeast

ADDRESS:

CITY, STATE, ZIP:

SEND REPORT TO:

PHONE #:

FACILITY INFORMATION

PROJECT NAME: F41456

LOCATION:

PROJECT NO.:

FAX #:

ANALYTICAL INFORMATION: 8151KIP

MATRIX CODES: DW - DRINKING WATER; GW - GROUND WATER; WW - WASTE WATER; SO - SOIL; SL - SLUDGE; OI - OIL; LIQ - OTHER LIQUID; SOL - OTHER SOLID

ACCUTEST SAMPLE #	FIELD ID / POINT OF COLLECTION	COLLECTION DATE	COLLECTION TIME	SAMPLED BY:	MATRIX	# OF BOTTLES	PRESERVATION HCl	NaOH	HNO3	H2SO4	NONE	8151KIP	LAB USE ONLY
	F41456-1	06/14/06	10:15		SO	1					X	X	

DATA TURNAROUND INFORMATION

- ☐ STANDARD
- ☐ 48 HOUR RUSH
- ☐ 24 HOUR EMERGENCY
- ☒ OTHER 06/22/06

APPROVED BY:

EMERGENCY OR RUSH IS FAX DATA UNLESS PREVIOUSLY APPROVED

DATA DELIVERABLE INFORMATION

- ☐ STANDARD
- ☒ COMMERCIAL "B"
- ☐ DISK DELIVERABLE
- ☐ STATE FORMS
- ☐ OTHER (SPECIFY)

COMMENTS/REMARKS

AIGC

SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESION, INCLUDING COURIER DELIVERY

RELINQUISHED BY SAMPLER:	DATE TIME:	RECEIVED BY:	RELINQUISHED BY:	DATE TIME:	RECEIVED BY:
1. Steven Carson	6-16-06 17:00	1. [illegible] 6/17/06 930	2.		2.
RELINQUISHED BY: 3.	DATE TIME:	RECEIVED BY: 3.	RELINQUISHED BY: 4.	DATE TIME:	RECEIVED BY: 4.
RELINQUISHED BY: 5.	DATE TIME:	RECEIVED BY: 5.	SEAL #	PRESERVE WHERE APPLICABLE ☐	ON ICE ☒ TEMPERATURE 2.6 C

10.1 10

F41456: Chain of Custody
Page 1 of 2
Accutest Laboratories Gulf Coast, Inc.

ACCUTEST.

SAMPLE RECEIPT LOG

JOB #: F41456 DATE/TIME RECEIVED: 6/17/06 9:30

CLIENT: ALSE INITIALS: BN

Condition/Variance (Circle "Y" for yes and "N" for no or NA. If "N" is circled, see variance for explanation):

1. (Y) N Sample received in undamaged condition.
2. (Y) N Samples received within temp. range.
3. Y (N) Sample received with proper pH.
4. (Y) N Sample received in proper containers.
5. (Y) N Sample volume sufficient for analysis.
6. (Y) N Sample received with chain of custody.
7. (Y) N Chain of Custody matches **sample IDs and analysis** on containers.
8. (Y) N NA Custody seal received intact and tamper not evident on cooler.
9. (Y) N NA Custody seal received intact and tamper not evident on bottles.

SAMPLE or FIELD ID	BOTTLE #	DATE SAMPLED	MATRIX	VOLUME	LOCATION	PRESERV.	PH
1	1	6/14/06	SO	4oz	~~X~~ IJ	(1)2,3,4,5,6	(U) <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA
						1,2,3,4,5,6	U, <2, >12, NA

LOCATION: WI: Walk-In VR: Volatile Refrig. SUB: Subcontract EF: Encore Freezer

PRESERVATIVES: 1: None 2: HCL 3: HNO3 4: H2SO4 5: NAOH 6: Other

Comments:

pH of waters checked excluding volatiles

pH of soils N/A

Delivery method: Courier: Tracking#:

COOLER TEMP: COOLER TEMP:

COOLER TEMP: COOLER TEMP:

Method of sample disposal: (circle one) Accutest disposal Hold Return to Client

Form: SM012, Rev.12/14/04, QAO

F41456: Chain of Custody
Page 2 of 2

GC Semi-volatiles

QC Data Summaries

(Accutest Laboratories Gulf Coast, Inc.)

Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

Method Blank Summary

Job Number: F41456
Account: ALSE Accutest Laboratories Southeast, Inc.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6026-MB	DD56811.D	1	06/20/06	RC	06/20/06	OP6026	GDD1059

The QC reported here applies to the following samples: **Method:** SW846 8151

F41456-1A

CAS No.	Compound	Result	RL	MDL	Units	Q
94-75-7	2,4-D	ND	10	5.0	ug/l	
93-72-1	2,4,5-TP (Silvex)	ND	2.0	1.5	ug/l	

CAS No.	Surrogate Recoveries		Limits
19719-28-9	2,4-DCAA	131%	23-171%

11.1

11

Blank Spike Summary

Job Number: F41456
Account: ALSE Accutest Laboratories Southeast, Inc.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6026-BS	DD56812.D	1	06/20/06	RC	06/20/06	OP6026	GDD1059

The QC reported here applies to the following samples: **Method:** SW846 8151

F41456-1A

CAS No.	Compound	Spike ug/l	BSP ug/l	BSP %	Limits
94-75-7	2,4-D	20	14.7	74	44-152
93-72-1	2,4,5-TP (Silvex)	4	2.4	60	41-142

CAS No.	Surrogate Recoveries	BSP	Limits
19719-28-9	2,4-DCAA	114%	23-171%

11.2

11

Matrix Spike/Matrix Spike Duplicate Summary

Job Number: F41456
Account: ALSE Accutest Laboratories Southeast, Inc.
Project: ITVAVAB: Indian Head

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP6026-MS	DD56832.D	1	06/21/06	RC	06/20/06	OP6026	GDD1060
OP6026-MSD	DD56833.D	1	06/21/06	RC	06/20/06	OP6026	GDD1060
F41365-1	DD56813.D	1	06/20/06	RC	06/20/06	OP6026	GDD1059

The QC reported here applies to the following samples: **Method:** SW846 8151

F41456-1A

CAS No.	Compound	F41365-1 ug/l	Q	Spike ug/l	MS ug/l	MS %	MSD ug/l	MSD %	RPD	Limits Rec/RPD
94-75-7	2,4-D	ND		20	26.5	133	23.2	116	13	28-144/25
93-72-1	2,4,5-TP (Silvex)	ND		4	3.7	93	3.1	78	18	25-137/24

CAS No.	Surrogate Recoveries	MS	MSD	F41365-1	Limits
19719-28-9	2,4-DCAA	147%	116%	110%	23-171%

11.3

11

LabLink Analytical Data Report
Indian Head 120359

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261 6/96)*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F41456-1	Aroclor 1016	12674-11-2	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Aroclor 1221	11104-28-2	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Aroclor 1232	11141-16-5	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Aroclor 1242	53469-21-9	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Aroclor 1248	12672-29-6	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Aroclor 1254	11097-69-1	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Aroclor 1260	11096-82-5	SW846 8082	ND		ug/kg	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Total PCBs		SW846 8082	ND		ug/kg	39		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	TPH (C10-C28)		SW846 8015 M	11.3		mg/kg	9.7		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	o-Terphenyl	84-15-1	SW846 8015 M	98		%	19		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Tetrachloro-m-xylene	877-09-8	SW846 8082	85		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Decachlorobiphenyl	2051-24-3	SW846 8082	85		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	TPH-GRO (C6-C10)		SW846 8015	6.28	J	mg/kg	6.7		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	4-Bromofluorobenzene	460-00-4	SW846 8015	82		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	aaa-Trifluorotoluene	98-08-8	SW846 8015	92		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Ignitability (Flashpoint) (b)		SW846 1010	>200	>	Deg. F			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Sulfide Reactivity		SW846 CHAP7	<50	<	mg/kg	50		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Corrosivity as pH		SW846 CHAP7	6.2					1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Cyanide Reactivity		SW846 CHAP7	<1.5	<	mg/kg	1.5		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Solids, Percent		EPA 160.3 M	85.8		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4-D	94-75-7	SW846 8151	ND		mg/l	0.015	10	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4,5-TP (Silvex)	93-72-1	SW846 8151	ND		mg/l	0.002	1	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	gamma-BHC (Lindane)	58-89-9	SW846 8081A	ND		mg/l	0.0005	0.4	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Chlordane	12789-03-6	SW846 8081A	ND		mg/l	0.005	0.03	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Endrin	72-20-8	SW846 8081A	ND		mg/l	0.001	0.02	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Heptachlor	76-44-8	SW846 8081A	ND		mg/l	0.0005	0.008	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Heptachlor epoxide	1024-57-3	SW846 8081A	ND		mg/l	0.0005	0.008	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Methoxychlor	72-43-5	SW846 8081A	ND		mg/l	0.001	10	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Toxaphene	8001-35-2	SW846 8081A	ND		mg/l	0.025	0.5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Tetrachloro-m-xylene	877-09-8	SW846 8081A	92		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4-DCAA	19719-28-9	SW846 8151	105		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Decachlorobiphenyl	2051-24-3	SW846 8081A	95		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Quant Factor		SW846 8081A	0.1		none			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Arsenic	7440-38-2	SW846 6010B	0.026	B	mg/l	0.04	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Barium	7440-39-3	SW846 6010B	0.38	B	mg/l	1	100	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Cadmium	7440-43-9	SW846 6010B	0.0052		mg/l	0.005	1	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Chromium	7440-47-3	SW846 6010B	0.0021	B	mg/l	0.01	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Lead	7439-92-1	SW846 6010B	0.22		mg/l	0.05	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Mercury	7439-97-6	SW846 7470A	0.001	U	mg/l	0.01	0.2	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Selenium	7782-49-2	SW846 6010B	0.04	U	mg/l	0.1	1	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Silver	7440-22-4	SW846 6010B	0.0015	B	mg/l	0.01	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2-Methylphenol	95-48-7	SW846 8270C	ND		mg/l	0.05	200	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	3&4-Methylphenol		SW846 8270C	ND		mg/l	0.05	200	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Pentachlorophenol	87-86-5	SW846 8270C	ND		mg/l	0.25	100	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4,5-Trichlorophenol	95-95-4	SW846 8270C	ND		mg/l	0.05	400	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4,6-Trichlorophenol	88-06-2	SW846 8270C	ND		mg/l	0.05	2	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	1,4-Dichlorobenzene	106-46-7	SW846 8270C	ND		mg/l	0.05	7.5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4-Dinitrotoluene	121-14-2	SW846 8270C	ND		mg/l	0.05	0.13	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Hexachlorobenzene	118-74-1	SW846 8270C	ND		mg/l	0.05	0.13	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Hexachlorobutadiene	87-68-3	SW846 8270C	ND		mg/l	0.05	0.5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Hexachloroethane	67-72-1	SW846 8270C	ND		mg/l	0.05	3	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Nitrobenzene	98-95-3	SW846 8270C	ND		mg/l	0.05	2	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Pyridine	110-86-1	SW846 8270C	ND		mg/l	0.1	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2-Fluorophenol	367-12-4	SW846 8270C	43		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Phenol-d5	4165-62-2	SW846 8270C	26		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2,4,6-Tribromophenol	118-79-6	SW846 8270C	85		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Nitrobenzene-d5	4165-60-0	SW846 8270C	77		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	2-Fluorobiphenyl	321-60-8	SW846 8270C	78		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Terphenyl-d14	1718-51-0	SW846 8270C	83		%			1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Benzene	71-43-2	SW846 8260B	ND		mg/l	0.01	0.5	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Chlorobenzene	108-90-7	SW846 8260B	ND		mg/l	0.02	100	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Chloroform	67-66-3	SW846 8260B	ND		mg/l	0.02	6	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Carbon tetrachloride	56-23-5	SW846 8260B	ND		mg/l	0.02	0.5	10	120359-DW-SO-001	14-Jun-06	10:15

LabLink Analytical Data Report
Indian Head 120359

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261 6/96)*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F41456-1A	1,1-Dichloroethylene	75-35-4	SW846 8260B	ND		mg/l	0.02	0.7	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	1,2-Dichloroethane	107-06-2	SW846 8260B	ND		mg/l	0.02	0.5	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	p-Dichlorobenzene	106-46-7	SW846 8260B	ND		mg/l	0.02	7.5	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Methyl ethyl ketone	78-93-3	SW846 8260B	ND		mg/l	0.1	200	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Tetrachloroethylene	127-18-4	SW846 8260B	ND		mg/l	0.02	0.7	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Trichloroethylene	79-01-6	SW846 8260B	0.0274		mg/l	0.02	0.5	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Vinyl chloride	75-01-4	SW846 8260B	ND		mg/l	0.01	0.2	10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Dibromofluoromethane	1868-53-7	SW846 8260B	105		%			10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Toluene-D8	2037-26-5	SW846 8260B	95		%			10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	4-Bromofluorobenzene	460-00-4	SW846 8260B	112		%			10	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	1,2-Dichloroethane-D4	17060-07-0	SW846 8260B	114		%			10	120359-DW-SO-001	14-Jun-06	10:15

(b) Not ignitable
Found 0 results exceeding regulatory limits.
** Indicates result outside regulatory limits.
* Regulatory limits listed in this document have been obtained from the lastest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.

LabLink Analytical Data Report - Hits/J-Values Only
Indian Head 120359

Including: TCLP Maximum Contaminant Concentrations (40 CFR 261 6/96)*

Sample	Parameter	Cas No.	Method	Result	Qual	Units	RL	TCLP Limit	DF	Client ID	Collected	Time
F41456-1	TPH (C10-C28)		SW846 8015 M	11.3		mg/kg	9.7		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	TPH-GRO (C6-C10)		SW846 8015	6.28	J	mg/kg	6.7		1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1	Corrosivity as pH		SW846 CHAP7	6.2					1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Arsenic	7440-38-2	SW846 6010B	0.026	B	mg/l	0.04	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Barium	7440-39-3	SW846 6010B	0.38	B	mg/l	1	100	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Cadmium	7440-43-9	SW846 6010B	0.0052		mg/l	0.005	1	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Chromium	7440-47-3	SW846 6010B	0.0021	B	mg/l	0.01	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Lead	7439-92-1	SW846 6010B	0.22		mg/l	0.05	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Silver	7440-22-4	SW846 6010B	0.0015	B	mg/l	0.01	5	1	120359-DW-SO-001	14-Jun-06	10:15
F41456-1A	Trichloroethylene	79-01-6	SW846 8260B	0.0274		mg/l	0.02	0.5	10	120359-DW-SO-001	14-Jun-06	10:15

Found 0 results exceeding regulatory limits.
** Indicates result outside regulatory limits.
* Regulatory limits listed in this document have been obtained from the lastest version of the regulations cited and are used for advisory purposes only. Accutest assumes no responsibility for errors in regulatory documents or changes to criteria detailed in later versions of the referenced regulation. It is the responsibility of the user to verify these limits before using or reporting any data.

SUBMITTAL PACKAGE TRANSMITTAL FORM

(QC ORGANIZATION APPROVAL)

SUBMITTAL PACKAGE TRANSMITTAL FORM - LANTDIV CONTRACT NO. N62470-03-D-4402 (For Transmitting Product Data, Shop Drawings, Material Samples and Administrative Data)	Date 6/28/2006	Transmittal No. 004

SECTION 1 - REQUEST FOR QC ORGANIZATION APPROVAL

To:	From:	Project Title: Interim Removal Action at Site 57 - Building 292 TCE Remova	Check One
Navy	FSSI/Shaw	Location: Indian Head, Maryland Task Order No.: 025	☑ Initial Submittal ☐ Re-submittal
Project/Job No.: 120359		Specification Section: Work Plan 3.7	SD Number: NA

Item No.	Description of Item(s) Submitted	Contract Reference Document		No. of Copies	FOR QC REVIEW ONLY	
		Spec Para No.	Dwg. Sht. No.		ACTION CODE	DATE
004-01	Facility Permit - Site 57	3.7	NA	1	A	6/28/06

Action Code Comments/Explanation

A - Approved
AN - Approved as Noted
NR - Not Reviewed
RR - Revise & Resubmit
D - Disapproved

(Use Continuation Sheet, if necessary)

SECTION II - APPROVAL ACTION (Please provide action code(s) in above review block)

Distribution:

Certification Statement: I hereby certify that the equipment, material, or article shown and marked in this submittal is proposed to be incorporated into Contract Number N62470-03-D-4402, is in compliance with the contract drawings and specifications, can be installed in the allocated spaces, and is approved for use.

Certified by Submittal Reviewer Patricia M Gamble Date 6/28/06

Approved by QC Manager Adam Forsythe Jr. Date 6/28/06

THE ENVIRONMENTAL QUALITY COMPANY ®

Generator Approval Notification

June 28, 2006

Customer: EQIS NORTH CAROLINA
Fax: (919) 363-4713

SHAWN A JORGENSEN
NAVAL DISTRICT WASHINGTON - INDIAN HEAD
HN2SJ, B289
101 STRAUSS AVENUE
INDIAN HEAD, MD 20640-5035

This Generator Approval Notification acknowledges the acceptability of waste material(s) into the EQ environmental protection facility identified below and ensures that this facility has the appropriate permit(s) issued by federal and state regulatory agencies to properly transport, treat, and/or dispose of the waste material(s).

EQ FACILITY: Wayne Disposal, Inc. (MID048090633)
49350 North I-94 Service Drive, Belleville, Michigan 48111

Approval Number: 062306WCF

Generator EPA ID: MD4170024109 **Expires On:** 6/22/2007
Waste Common Name: TCE Soil
Comments: 1100 tons 1 x only. Must meet treatment standards. No free liquids or biodegradable sorbents.
Primary Waste Code: F002

The Approval(s) listed above are based upon characterization information supplied to EQ by the Customer and the generator (if other than the Customer). The Customer is ultimately responsible for the accuracy and completeness of all such information, whether provided by the Customer or the generator. The Customer must notify the EQ Resource Team immediately upon knowledge of any changes to this information. This Approval and all wastes which are transported, delivered, or tendered to EQ under this Approval shall be subject to the attached Standard Terms and Conditions.

The Approval(s) will expire on the date(s) noted. Any new Approvals obtained from EQ on future business will be valid for a period of one (1) year from the date of issuance. Within 60 days of the Approval Expiration Date, you will be notified of the requirements for recertification.

SUBMITTAL PACKAGE TRANSMITTAL FORM

(QC ORGANIZATION APPROVAL)

SUBMITTAL PACKAGE TRANSMITTAL FORM - LANTDIV CONTRACT NO. N62470-03-D-4402
(For Transmitting Product Data, Shop Drawings, Material Samples and Administrative Data)

Date	Transmittal No.
7/24/2006	005

SECTION 1 - REQUEST FOR QC ORGANIZATION APPROVAL

To:	From:	Project Title: Interim Removal Action at Site 57 - Building 292 TCE Remova	Check One
Navy	FSSI/Shaw	Location: Indian Head, Maryland Task Order No.: 025	☑ Initial Submittal ☐ Re-submittal
Project/Job No.: 120359		Specification Section: Work Plan 3.7	SD Number: NA

Item No.	Description of Item(s) Submitted	Contract Reference Document		No. of Copies	FOR QC REVIEW ONLY	
		Spec Para No.	Dwg. Sht. No.		ACTION CODE	DATE
005-01	Copies of Shipping Waste Manifests - Site 57	3.7	NA	1	A	7/24/2006

Action Code Comments/Explanation

A - Approved
AN - Approved as Noted
NR - Not Reviewed
RR - Revise & Resubmit
D - Disapproved

(Use Continuation Sheet, if necessary)

SECTION II - APPROVAL ACTION (Please provide action code(s) in above review block)

Distribution:

Certification Statement: I hereby certify that the equipment, material, or article shown and marked in this submittal is proposed to be incorporated into Contract Number N62470-03-D-4402, is in compliance with the contract drawings and specifications, can be installed in the allocated spaces, and is approved for use.

Certified by Submittal Reviewer Patricia M Gamble Date 7/27/06

Approved by QC Manager Adam J Forsythe Date 7/28/06

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: [illegible]
Manifest Document No.: 06276
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
[illegible]
4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number: MI 10280002
B. State Generator's ID

5. Transporter 1 Company Name: [illegible]
6. US EPA ID Number: [illegible]
C. State Transporter's ID
D. Transporter's Phone: [illegible]

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

9. Designated Facility Name and Site Address
[illegible]
10. US EPA ID Number: MID[illegible]
G. State Facility's ID
H. Facility's Phone: [illegible]

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, NAVIGUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 002306WCF
TK # 1270

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schuenk
Signature: [signature]
Date (Month Day Year): [illegible]

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Christopher E. Gould
Signature: [signature]
Date (Month Day Year): [illegible]

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date (Month Day Year)

FACILITY

19. Discrepancy Indication Space

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

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

236

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: [illegible]
Manifest Document No.: [illegible]
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
[illegible]
4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number: MI 10280003
B. State Generator's ID

5. Transporter 1 Company Name: [illegible]
6. US EPA ID Number: PAD987417515
C. State Transporter's ID
D. Transporter's Phone: [illegible]

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

9. Designated Facility Name and Site Address
WAYNE [illegible]
[illegible]
[illegible] MI [illegible]
10. US EPA ID Number: MID[illegible]
G. State Facility's ID
H. Facility's Phone: [illegible]

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	D	NO. HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, DAPHIM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062308WCF
TK# 1275

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwalk
Signature: [signature]
Date: Month 06 Day 27 Year [illegible]

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: [illegible]
Signature: [signature]
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MDD[illegible]
Manifest Document No. [illegible]
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
[illegible]
4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number MI 10280004
B. State Generator's ID

5. Transporter 1 Company Name [illegible]
6. US EPA ID Number PAD[illegible]
C. State Transporter's ID
D. Transporter's Phone [illegible]

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

9. Designated Facility Name and Site Address
[illegible]
10. US EPA ID Number MID[illegible]
G. State Facility's ID
H. Facility's Phone [illegible]

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	N	NO, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 22	T	F002
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062300WCF
TK # 105

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-741-2263
ERG#171

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. 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: Edward Shwarth
Signature: [illegible]
Date: Month [illegible] Day [illegible] Year [illegible]

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP Rev

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: [illegible]

Manifest Document No.

2. Page 1 of

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

3. Generator's Name and Mailing Address
[illegible]

4. Generator's Phone ( ) 301 [illegible]

A. State Manifest Document Number: MI 10280005

B. State Generator's ID

5. Transporter 1 Company Name: US HAUL TRANSPORT INC

6. US EPA ID Number: PAT[illegible]

C. State Transporter's ID

D. Transporter's Phone: [illegible]

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE 2 LANDFILL
[illegible] NORTH [illegible] SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID[illegible]

G. State Facility's ID

H. Facility's Phone: [illegible]

	HM	11. US 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. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 002306WCF
TK # 1268

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward J. Schwartz
Signature: [signature]
Date: Month Day Year 06 27 0[illegible]

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MIN[illegible]
Manifest Document No. 10280
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
[illegible]
4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number MI 10280006
B. State Generator's ID

5. Transporter 1 Company Name: US [illegible] TRANSPORT INC
6. US EPA ID Number: PAD987347515
C. State Transporter's ID
D. Transporter's Phone: [illegible]

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL INC SITE #2 LANDFILL
[illegible] NORTH [illegible] DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID[illegible]
G. State Facility's ID
H. Facility's Phone: [illegible]

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	X	001	DT	EST 22	T	F002
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082308VVCF
TK # 1265

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: [illegible] Signature: [illegible] Date (Month Day Year): [illegible]

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: [illegible] Signature: [illegible] Date (Month Day Year): [illegible]

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name: Signature: Date (Month Day Year):

TRANSPORTER

19. Discrepancy Indication Space

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: Date (Month Day Year):

240

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP Rev

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Please print or type.

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible]

Manifest Document No. [illegible]

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
[illegible]

4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number
MI 10280007

B. State Generator's ID

5. Transporter 1 Company Name
[illegible]

6. US EPA ID Number
[illegible]

C. State Transporter's ID

D. Transporter's Phone [illegible]

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
[illegible]

10. US EPA ID Number
[illegible]

G. State Facility's ID

H. Facility's Phone
[illegible]

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☐	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062308WCF
TK# 416

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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 [illegible] | Signature [illegible] | Date Month Day Year [illegible]

GENERATOR

17. Transporter 1 Acknowledgment of Receipt of Materials

Printed/Typed Name [illegible] | Signature [illegible] | Date Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials

Printed/Typed Name | Signature | Date Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

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

Printed/Typed Name | Signature | Date Month Day Year

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

241

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD[illegible]
Manifest Document No. 80008
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
IHDWCL, Bldg 292, 101 Strauss Ave
Indian Head, MD 20640
4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number: MI 10280008
B. State Generator's ID

5. Transporter 1 Company Name: US FOOD TRANSPORT INC
6. US EPA ID Number: PAD087347915
C. State Transporter's ID
D. Transporter's Phone: 800-[illegible]

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

9. Designated Facility Name and Site Address
WASTE DISPOSAL, INC. SITE 2 LANDFILL
4200 NORTH GREENFIELD SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID[illegible]
G. State Facility's ID
H. Facility's Phone: 800-[illegible]

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒ RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082308VCF
TK# 1284

K. Handling Codes: a b c d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301 [illegible] 2263
ERG#171

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. 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: Edward Schroeder | Signature | Date: Month 02 Day 27 Year

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Thomas Hines | Signature | Date: Month 02 Day 27 Year

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

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

242

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GENERATOR 1st COPY

EQP Rev

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: [illegible]

Manifest Document No.: [illegible]

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
[illegible]
4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number: MI 10280009
B. State Generator's ID:

5. Transporter 1 Company Name: US BULK TRANSPORT INC
6. US EPA ID Number: PAD987147515
C. State Transporter's ID: [illegible]
D. Transporter's Phone: [illegible]

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID: UAW4619[illegible]
F. Transporter's Phone:

9. Designated Facility Name and Site Address
WAYNE DISPOSAL INC SITE #2 LANDFILL
[illegible]
BELLEVILLE, MI 48111
10. US EPA ID Number: MID[illegible]
G. State Facility's ID:
H. Facility's Phone: [illegible]

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-714-2263
ERG#171

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. 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: Edward Schwalk
Signature:
Date: Month 06 Day 27 Year [illegible]

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: [illegible]
Signature:
Date: Month [illegible] Day [illegible] Year [illegible]

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

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WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: [illegible]
Manifest Document No.: [illegible]
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
[illegible]
4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number: MI 10280010
B. State Generator's ID:

5. Transporter 1 Company Name: [illegible]
6. US EPA ID Number: [illegible]
C. State Transporter's ID: [illegible]
D. Transporter's Phone: [illegible]

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID: [illegible]
F. Transporter's Phone:

9. Designated Facility Name and Site Address
[illegible]
10. US EPA ID Number: [illegible]
G. State Facility's ID:
H. Facility's Phone: [illegible]

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒ NO, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306VCF

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-794-2263
ERG#171

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. 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: [illegible] | Signature: [illegible] | Date: Month 02 Day 27 Year [illegible]

17. Transporter 1 Acknowledgment of Receipt of Materials

Printed/Typed Name: [illegible] | Signature: [illegible] | Date: Month [illegible] Day [illegible] Year [illegible]

18 Transporter 2 Acknowledgment of Receipt of Materials

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

TRANSPORTER

19. Discrepancy Indication Space

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

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

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

244

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP Rev

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MD042003100
Manifest Document No.: 8001
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility Indian Head
NFAMS, Bldg 30, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744 2352

A. State Manifest Document Number: MI 10280011
B. State Generator's ID:

5. Transporter 1 Company Name: US BULK TRANSPORT INC
6. US EPA ID Number: PAD087347515
C. State Transporter's ID:
D. Transporter's Phone: 800-695-8511

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID: UPW 4619
F. Transporter's Phone:

9. Designated Facility Name and Site Address
WASTE MANAGEMENT INC, SITE #2 LANDFILL
6000 MORTON SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID:
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062108WCF
TK# 192-3

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Ronald Schwenk
Signature:
Date (Month Day Year):

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name:
Signature:
Date (Month Day Year):

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name:
Signature:
Date (Month Day Year):

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MDH7000[illegible]100
Manifest Document No. 80012
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Ordnance Facility Indian Head
HROWSU Bldg 700 101 Strauss Ave
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2[illegible]

A. State Manifest Document Number
MI 10280012
B. State Generator's ID

5. Transporter 1 Company Name
US PAVE TRANSPORT INC
6. US EPA ID Number
PAD987[illegible]7515
C. State Transporter's ID
D. Transporter's Phone 800-[illegible]-8611

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID [illegible]
F. Transporter's Phone

9. Designated Facility Name and Site Address
WASTE DISPOSAL INC SITE #2 (ANDERL)
4000 NORTH LAN SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number
MID048090673
G. State Facility's ID
H. Facility's Phone 800-[illegible]-5488

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062309WCF
TK # 1152

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward L. Schwark
Signature: [signature]
Date: Month [illegible] Day [illegible] Year [illegible]

GENERATOR

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

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

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

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MICHIGAN DEPARTMENT OF
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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD041[illegible]
Manifest Document No. 90213
2. Page 1 of

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

3. Generator's Name and Mailing Address
Naval Support Facility Indian Head
NAVSEA Bldg 101 (Stop 2)
Indian Head, MD 20640
4. Generator's Phone ( ) 301 [illegible]

A. State Manifest Document Number MI 10280013
B. State Generator's ID

5. Transporter 1 Company Name
US ECOLOGY TRANSPORT INC
6. US EPA ID Number PAD987247515
C. State Transporter's ID UPW 46196
D. Transporter's Phone [illegible]

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

9. Designated Facility Name and Site Address
WASTE DISPOSAL, INC. SITE #1 LANDFILL
4000 NORTH BEECH DAILY DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number MID048096611
G. State Facility's ID
H. Facility's Phone [illegible]

	HM	11. US 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. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 002300WCF
TK# 149

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263.
ERG#171

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. 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: Edward Schwerk
Signature: Edward Schwerk
Date: Month Day Year 06 27 10

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

247

EPA Form 8700-22 (Rev. 9/88)

GENERATOR 1st COPY

EQP Rev.

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MDH [illegible]
Manifest Document No.: 8004
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility Indian Head
NDW/NJ Bldg 30, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 [illegible]

A. State Manifest Document Number: MI 10280014
B. State Generator's ID:

5. Transporter 1 Company Name: [illegible] TRANSPORT INC
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: PAW 461965
D. Transporter's Phone: 800-[illegible]

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

9. Designated Facility Name and Site Address
WASTE DISPOSAL INC. SITE #2 LANDFILL
[illegible] DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090011
G. State Facility's ID:
H. Facility's Phone: 800-[illegible]

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	X	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082306WCF
TK # 359

K. Handling Codes: a b c d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 30[illegible]-22[illegible]3
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month Day Year

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: [illegible] LAMPY
Signature:
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

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WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MDH[illegible]

Manifest Document No.: 2001

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Surface Facility Indian Head
Building 300, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744 [illegible]

A. State Manifest Document Number: MI 10280015

B. State Generator's ID

5. Transporter 1 Company Name: [illegible]

6. US EPA ID Number: PA[illegible]

C. State Transporter's ID: UPU461965

D. Transporter's Phone: [illegible]

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL INC. SITE #2 LANDFILL
18500 NORTH ON SERVICE DRIVE
GRIFFITH, IN 46319

10. US EPA ID Number: MID[illegible]

G. State Facility's ID

H. Facility's Phone: [illegible]

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082306WCF
TK # 208

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: [signature]
Date: Month Day Year [illegible]

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: [illegible]
Signature: [signature]
Date: Month Day Year [illegible]

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

249

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GENERATOR 1st COPY

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MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MDU [illegible]
Manifest Document No. [illegible]
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility Indian Head
NAVSEA Bldg 101 Strauss St
Indian Head MD 20640
4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number
MI 10280016
B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC
6. US EPA ID Number
PAD987361751
C. State Transporter's ID UPW4601965
D. Transporter's Phone 800-669-5611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL INC SITE #1 (AMRI)
4600 HOWARD GROVE ROAD
BELLEVILLE, MI 48111
10. US EPA ID Number
MID048090771
G. State Facility's ID
H. Facility's Phone 800-592-5480

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM, 9, NA3077, PGIII)	001	DT	EST 23	T	F002
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK # 134

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schaal
Signature: [signature]
Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

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EPA Form 8700-22 (Rev. 9/88)

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WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible]
Manifest Document No. 3001
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Surface Facility Indian Head
NSWC Bldg 201 101 Strauss St
Indian Head MD 20640
4. Generator's Phone ( ) 301 744 2563

A. State Manifest Document Number MI 10280017
B. State Generator's ID

5. Transporter 1 Company Name
US ECOLOGY TRANSPORTATION INC
6. US EPA ID Number
PAD987317511
C. State Transporter's ID VRW461965
D. Transporter's Phone 800.526.0511

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

9. Designated Facility Name and Site Address
WASTE MEDICAL INC - SITE 2 CLARION
4000 NORTH DIXIE DRIVE NORTH
BELLEVILLE MI 48111
10. US EPA ID Number
MID980991117
G. State Facility's ID
H. Facility's Phone 800.950.5400

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	G	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062300WCF
Treat Rollback

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Frank Schwab | Signature | Date: Month 06 Day 07 Year 0[illegible]

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: James Nunnsey | Signature | Date: Month [illegible] Day [illegible] Year [illegible]

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name | Signature | Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

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GENERATOR 1st COPY

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WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80018

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280018

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW461965

D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5489

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082306WCF
TK# 1273

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month Day Year 06 28 00

GENERATOR

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Cliff Chapman
Signature
Date: Month Day Year 06 28 00

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

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

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80019
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280019
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID UPW461965
D. Transporter's Phone 800-603-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 544-1

K. Handling Codes
a
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 27 Year 10

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Johnny Fugate
Signature: Johnny Fugate
Date: Month 06 Day 28 Year 10

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under authority of Part 111 and Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80020
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280020
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW 461 965
D. Transporter's Phone: 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK #

K. Handling Codes
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b
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 12 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: RICHARD STEVENSON
Signature
Date: Month 06 Day 28 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80021
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280021
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID UPW461965
D. Transporter's Phone 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062308WCF
TK# 3114 XBX-2195 PA

K. Handling Codes
a
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature
Date: Month 06 Day 19 Year 0

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: TED HELKER
Signature
Date: Month 06 Day 20 Year 0

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80023
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280023
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: VPW 461956
D. Transporter's Phone: 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK # 1207

K. Handling Codes
a
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263.
ERG#171

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. 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: Edward Schwenk
Signature
Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: DANNY STAFE
Signature
Date: Month 06 Day 28 Year 10

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

256

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under authority of Act 451, 1994, Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80024
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280024
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW4601965
D. Transporter's Phone: 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 1295

K. Handling Codes
a
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: EDWARD SCHWENK
Signature: Edward Schwenk
Date: Month Day Year 06 23 10

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: GREG YARNELL
Signature: Greg Yarnell
Date: Month Day Year 06 23 10

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80025

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 299, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280025

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC

6. US EPA ID Number: PAD987347515

C. State Transporter's ID UPW 461965

D. Transporter's Phone 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone 800-592-5489

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 1924

K. Handling Codes
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 27 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Michael Eugene Wagner
Signature
Date: Month 06 Day 25 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
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Part 121 of Act 451, 1994, as amended.

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 800269

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280026

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID UPW461965

D. Transporter's Phone 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK # 192-5

K. Handling Codes
a
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: EDWARD Schwan K. | Signature | Date: Month 06 Day 28 Year 10

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials

Printed/Typed Name: JOHN FLAUGH | Signature | Date: Month 06 Day 28 Year 10

18 Transporter 2 Acknowledgment of Receipt of Materials

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

FACILITY

19. Discrepancy Indication Space

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

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under authority of Part 111 and Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type. Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80027
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280027
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW 461 96
D. Transporter's Phone: 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK # 109

K. Handling Codes
a
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d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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Printed/Typed Name: Edward Schwerk
Signature: Edward Schwerk
Date: Month Day Year 06 12 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Jesse DeGarmo
Signature: Jesse DeGarmo
Date: Month Day Year 06 20 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

260

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

GENERATOR

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING, MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80028

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280028

B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC.

6. US EPA ID Number PAD987347515

C. State Transporter's ID UPW 46196

D. Transporter's Phone 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number MID048090633

G. State Facility's ID

H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 136

K. Handling Codes
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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GENERATOR

Printed/Typed Name: Edward Schwerdt
Signature: Edward Schwerdt
Date: Month 06 Day 28 Year 00

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Larry Hood
Signature: Larry Hood
Date: Month 06 Day 28 Year 00

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING, MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80029
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280029
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID UPW 461965
D. Transporter's Phone 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 110

K. Handling Codes
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: David Wagner
Signature: David Wagner
Date: Month Day Year 6 28 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80030
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280030
B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC.
6. US EPA ID Number PAD987347515
C. State Transporter's ID UPW461965
D. Transporter's Phone 800-603-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number MID048090633
G. State Facility's ID
H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒ RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082308WCF
TK# 110-1

K. Handling Codes
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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Printed/Typed Name: Edward Schaceck
Signature: Edward Schaceck
Date: Month 06 Day 27 Year 0

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Tammy Wagner
Signature: Tammy L Wagner
Date: Month 06 Day 28 Year 0

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80031
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280031
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW 461965
D. Transporter's Phone: 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒ RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK # 179

K. Handling Codes
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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Printed/Typed Name: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 28 Year 0

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Brian Bowser
Signature: Brian Bowser
Date: Month 06 Day 28 Year 0

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80032
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280032
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW 461965
D. Transporter's Phone: 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒ RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062308WCF
TK# 150

K. Handling Codes
a
b
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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Printed/Typed Name: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 12 Year

GENERATOR

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: CHIP Reynolds
Signature
Date: Month 06 Day 12 Year 04

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

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

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80033
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280033
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID
D. Transporter's Phone 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone 800-592-5489

	HM	11. US 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. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT		T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER_____-
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day Year

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: MAURICE BART
Signature: Maurice Bart
Date: Month 06 Day 28 Year 0

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

266

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD417002410 9
Manifest Document No. 80034
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280034
B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC
6. US EPA ID Number PAD987347515
C. State Transporter's ID UPW461965
D. Transporter's Phone 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number MID048090633
G. State Facility's ID
H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082306WCF
TK# 160-2

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: [signature]
Date: Month 06 Day 29 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: THOMAS J WHITEHILL
Signature: [signature]
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80035

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280035

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW 461965

D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 178

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Victor L Tracy
Signature: Victor L Tracy
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING, MI 48909-7538

EQP Rev.

1038

DEQ WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Required under authority of Part 111 and Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80036

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280036

B. State Generator's ID

5. Transporter 1 Company Name
US BULK TRANSPORT INC.

6. US EPA ID Number PAD987347515

C. State Transporter's ID UPW 461 965

D. Transporter's Phone 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number MID048090633

G. State Facility's ID

H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082308WCF

TK # 1038

K. Handling Codes
a
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d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 00

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: GREG PASLER
Signature: [illegible]
Date: Month 06 Day 29 Year 00

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

269

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038

EQP Rev

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Required under authority of Part 111 and Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80037
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280037
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW 461965
D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name
8. US EPA ID Number: - -
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK #

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month Day Year 06 29 06

TRANSPORTER
17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: James Humphrey
Signature: James Humphrey
Date: Month Day Year 06 29 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY
19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MD4170024109
Manifest Document No.: 80038
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number: MI 10280038
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: VPW 461965
D. Transporter's Phone: 800-609-6811

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	HM	11. US 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. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK #

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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GENERATOR

Printed/Typed Name: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 0

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Murdo Urquhart
Signature: Murdo Urquhart
Date: Month 06 Day 29 Year 0

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under Section 11 of Act 451, Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80039
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280039
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW 461965
D. Transporter's Phone: 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	HM	11. US 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. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐						
c.	☐						
d.	☐						

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK+

K. Handling Codes
a
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263-
ERG#171

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. 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: EDWARD SCHWENK
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: SCOTT FRANK
Signature: Scott Frank
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

272

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under Subpart 111 and Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80690
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280040
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW 461965
D. Transporter's Phone: 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 23	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 082306WCF
TK# 1297

K. Handling Codes
a.
b.
c.
d.

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwendt
Signature: Edward Schwendt
Date: Month 06 Day 29 Year 0

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Lori Lynn Beagle
Signature: Lori Lynn Beagle
Date: Month 06 Day 29 Year 0

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING, MI 48909-7538

EQP Rev

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: MD4170024109
Manifest Document No.: 8004
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number: MI 10280041
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW 461965
D. Transporter's Phone: 800-609-6611

7. Transporter 2 Company Name
8. US EPA ID Number: - -
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒ RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 23	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER_____-
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: BARRY K. Beegle
Signature: Barry K. Beegle
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80042
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280042
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW46965
D. Transporter's Phone: 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 21	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK # 359

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: EDWARD SCHWENK
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 01

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: QUINTIN LANLEY
Signature:
Date: Month 06 Day 29 Year 01

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

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WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80043
2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280043
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW461965
D. Transporter's Phone: 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	☒ RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	001	DT	EST 21	T	F002
b.	☐					
c.	☐					
d.	☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 149

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: ERIC HARTMAN
Signature: Eric Hartman
Date: Month 06 Day 29 Year 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to: WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING, MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80074

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280044

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID: UPW 461956

D. Transporter's Phone: 800-609-5611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 4	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 134

K. Handling Codes
a
b
c
d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month Day Year 06 29 06

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: ART Pollock
Signature: Art Pollock
Date: Month Day Year 06 29 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

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Please print or type. Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109
Manifest Document No. 80045
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640
4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280045
B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.
6. US EPA ID Number: PAD987347515
C. State Transporter's ID: UPW 461965
D. Transporter's Phone: 800-609-6611

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

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111
10. US EPA ID Number: MID048090633
G. State Facility's ID
H. Facility's Phone: 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 21	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 186

K. Handling Codes
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15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month Day Year 06 29 06

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: JAMES JENNAR
Signature: James Jenny
Date: Month Day Year 06 29 06

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

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

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP 5
Rev.

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

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Part 121 of Act 451, 1994, as amended.

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MD4170024109

Manifest Document No. 80048

2. Page 1 of 1

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

3. Generator's Name and Mailing Address
Naval Support Facility, Indian Head
HN2WSJ, Bldg 289, 101 Strauss St
Indian Head, MD 20640

4. Generator's Phone ( ) 301 744-2263

A. State Manifest Document Number MI 10280046

B. State Generator's ID

5. Transporter 1 Company Name: US BULK TRANSPORT INC.

6. US EPA ID Number: PAD987347515

C. State Transporter's ID UPW 461965

D. Transporter's Phone 800-609-6611

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
WAYNE DISPOSAL, INC., SITE #2 LANDFILL
49350 NORTH I-94 SERVICE DRIVE
BELLEVILLE, MI 48111

10. US EPA ID Number: MID048090633

G. State Facility's ID

H. Facility's Phone 800-592-5489

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ, HAZARDOUS WASTE, SOLID, N.O.S. (TRICHLOROETHYLENE, BARIUM), 9, NA3077, PGIII	☒	001	DT	EST 20	T	F002
b.		☐					
c.		☐					
d.		☐					

J. Additional Descriptions for Materials Listed Above
APPROVAL# 062306WCF
TK# 1152

K. Handling Codes
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d

15. Special Handling Instructions and Additional Information
24-HOUR EMERGENCY NUMBER 301-744-2263
ERG#171

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. 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: Edward Schwenk
Signature: Edward Schwenk
Date: Month 06 Day 29 Year 0

TRANSPORTER

17. Transporter 1 Acknowledgment of Receipt of Materials
Printed/Typed Name: Andrew D Anderson
Signature
Date: Month 06 Day 29 Year 0

18 Transporter 2 Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

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

GENERATOR

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOUR PER DAY.

EPA Form 8700-22 (Rev. 9/88)

To be mailed by Generator to:
WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30038
LANSING MI 48909-7538

EQP Rev

SUBMITTAL PACKAGE TRANSMITTAL FORM

(QC ORGANIZATION APPROVAL)

SUBMITTAL PACKAGE TRANSMITTAL FORM - LANTDIV CONTRACT NO. N62470-03-D-4402
(For Transmitting Product Data, Shop Drawings, Material Samples and Administrative Data)

Date	Transmittal No.
7/24/2006	006

SECTION I - REQUEST FOR QC ORGANIZATION APPROVAL

To:	From:	Project Title: Interim Removal Action at Site 57 - Building 292 TCE Remova	Check One
Navy	FSSI/Shaw	Location: Indian Head, Maryland Task Order No.: 025	☑ Initial Submittal ☐ Re-submittal
Project/Job No.: 120359		Specification Section: Work Plan 3.8.4	SD Number: NA

Item No.	Description of Item(s) Submitted	Contract Reference Document		No. of Copies	FOR QC REVIEW ONLY	
		Spec Para No.	Dwg. Sht. No.		ACTION CODE	DATE
006-01	Bituminous Concrete Binder (Base) and Wearing (Surface) Course - Site 57	3.8.4	NA	1	A	7/24/2006

Action Code Comments/Explanation

A - Approved
AN - Approved as Noted
NR - Not Reviewed
RR - Revise & Resubmit
D - Disapproved

(Use Continuation Sheet, if necessary)

SECTION II - APPROVAL ACTION (Please provide action code(s) in above review block)

Distribution:

Certification Statement: I hereby certify that the equipment, material, or article shown and marked in this submittal is proposed to be incorporated into Contract Number N62470-03-D-4402, is in compliance with the contract drawings and specifications, can be installed in the allocated spaces, and is approved for use.

Certified by Submittal Reviewer Patricia McGamble Date 7/27/06

Approved by QC Manager Adam J. Forshey Jr. Date 7/28/06

Charles County Asphalt Co., L.L.C.

Asphaltic Concrete
850 East Gude Drive, Suite A
Rockville, Md. 20850
301-652-2400
Fax 301-340-6592

July 21, 2006

R.E. Sheehi Paving
730 Plum Point Road
Huntingtown, Maryland 20639
Attention: Patrice

Re: Indian Head Site 57

Dear Madam:

We respectfully submit, for your approval, the following mix designs from our plant in Waldorf, Maryland(#177). To be used on the above referenced project.

MD SHA	S177	S177
Mix No.	09R2C09F	19R2C56T
Sieve	9.50mm	19.00mm
---	---	---
25.00mm	-	100
19.00mm	-	98
12.50mm	100	81
9.50mm	93	64
4.75mm	51	32
2.36mm	36	23
1.18mm	26	17
0.60mm	19	13
0.30mm	11	9
0.150mm	7	6
0.075mm	4.9	4.7
AC	5.0	4.5
D/B Ratio	1.03	1.20
Anti-Strip	0.0	0.0
M.S.G.	2.535	2.614
Mix Temp.	310F.	310F.
Gsb	2.728	2.771
Coldfeed:		
Millville #67	-	31
RCS #7	-	29
RCS #8	47	-
Millville #10	28	15
Sloan Sand	10	-
-1/2" Rap	15	-
-1 ½" Rap	-	25

Material Sources:	
RCS #7, #8	Aggregate Industries, Inc. Rockville Crushed Stone Rockville, Maryland
Millville #67, #10	Aggregate Industries, Inc. Millville Quarry Millville, W. VA
Sloan Sand	Randy Sloan Pit Waldorf, Maryland
-1 ½", -1/2" Rap	Stockpiled plant #177
AC (64-22)	Citgo Asphalt Baltimore, Maryland
Anti-Strip (Acra-500L)	Arrmaz Products Winterhaven, Florida
Tack Coat (CRS-1)	Central Oil Company Baltimore, Maryland
Plant #177	12455 Billingsley Road Waldorf, Maryland

Sincerely,

Lawrence R. Warfield
Materials Engineer

SUBMITTAL PACKAGE TRANSMITTAL FORM

(QC ORGANIZATION APPROVAL)

SUBMITTAL PACKAGE TRANSMITTAL FORM - LANTDIV CONTRACT NO. N62470-03-D-4402 (For Transmitting Product Data, Shop Drawings, Material Samples and Administrative Data)	Date 8/1/2006	Transmittal No. 007

SECTION 1 - REQUEST FOR QC ORGANIZATION APPROVAL

To:	From:	Project Title: Interim Removal Action at Site 57 - Building 292 TCE Remova	Check One
Navy	FSSI/Shaw	Location: Indian Head, Maryland Task Order No.: 025	☑ Initial Submittal ☐ Re-submittal
Project/Job No.: 120359		Specification Section: Work Plan 3.8.1	SD Number: NA

Item No.	Description of Item(s) Submitted	Contract Reference Document		No. of Copies	FOR QC REVIEW ONLY	
		Spec Para No.	Dwg. Sht. No.		ACTION CODE	DATE
007-01	Bob Taylor Engineering Compaction Test Results for Backfill Placement - Site 57	3.8.1	NA	1	A	8/1/2006

Action Code Comments/Explanation

A - Approved
AN - Approved as Noted
NR - Not Reviewed
RR - Revise & Resubmit
D - Disapproved

(Use Continuation Sheet, if necessary)

SECTION II - APPROVAL ACTION (Please provide action code(s) in above review block)

Distribution:

Certification Statement: I hereby certify that the equipment, material, or article shown and marked in this submittal is proposed to be incorporated into Contract Number N62470-03-D-4402, is in compliance with the contract drawings and specifications, can be installed in the allocated spaces, and is approved for use.

Certified by Submittal Reviewer Patricia M Gamble Date 8/1/06

Approved by QC Manager Adam Hoshley Jr Date 8/1/06

BOB TAYLOR ENGINEERING, INC.
Geotechnical Services • Materials Testing

22688 Three Notch Road
Lexington Park, MD 20653
301-862-4300 • 301-932-5575
Fax 301-862-5764

Robert F. Taylor, P.E., President

July 24, 2006
Job No. 06-328 BLDG

Shaw E & I
P.O. Box 827
Indian Head, Maryland 20640

Ref: Site 57
Indian Head, Maryland

Gentlemen:

Enclosed with this letter are the following for your review:

- Invoice Number 060702 Dated 07/24/06
- Summary Report Dated 07/24/06
- ASTM D-2487 Classification of Soil for Engineering Purposes (Sample 01)
- AASHTO T-180 Moisture Density Relations of Soil Using a 10 Lb. Rammer and 18-In. Drop Results (Sample 01)
- ASTM D-2922 Density of Soil In Place by the Nuclear Method (Numbered 01 through 54)
- A copy of the Field Reports Dated 06/16/06, 06/30/06, 07/05/06 and 07/08/06

Should you have any questions or concerns, please don't hesitate to call.

Sincerely,

Robert F. Taylor, P.E.
President

Enclosures

BOB TAYLOR ENGINEERING, INC.
Geotechnical Services • Materials Testing

22688 Three Notch Road
Lexington Park, MD 20653
301-862-4300 • 301-932-5575
Fax 301-862-5764

Robert F. Taylor, P.E., President

SUMMARY REPORT

DATE OF REPORT: 07/24/06

INSPECTION DATES: 06/16/06, 06/30/06, 07/05/06 and 07/08/06

JOB NUMBER: 06-328 BLDG

CLIENT Shaw E & I

PROJECT: Site 57
Indian Head, Maryland

TYPE(S) OF INSPECTION: In Place Field Density Tests

SUMMARY OF ENCLOSURES:

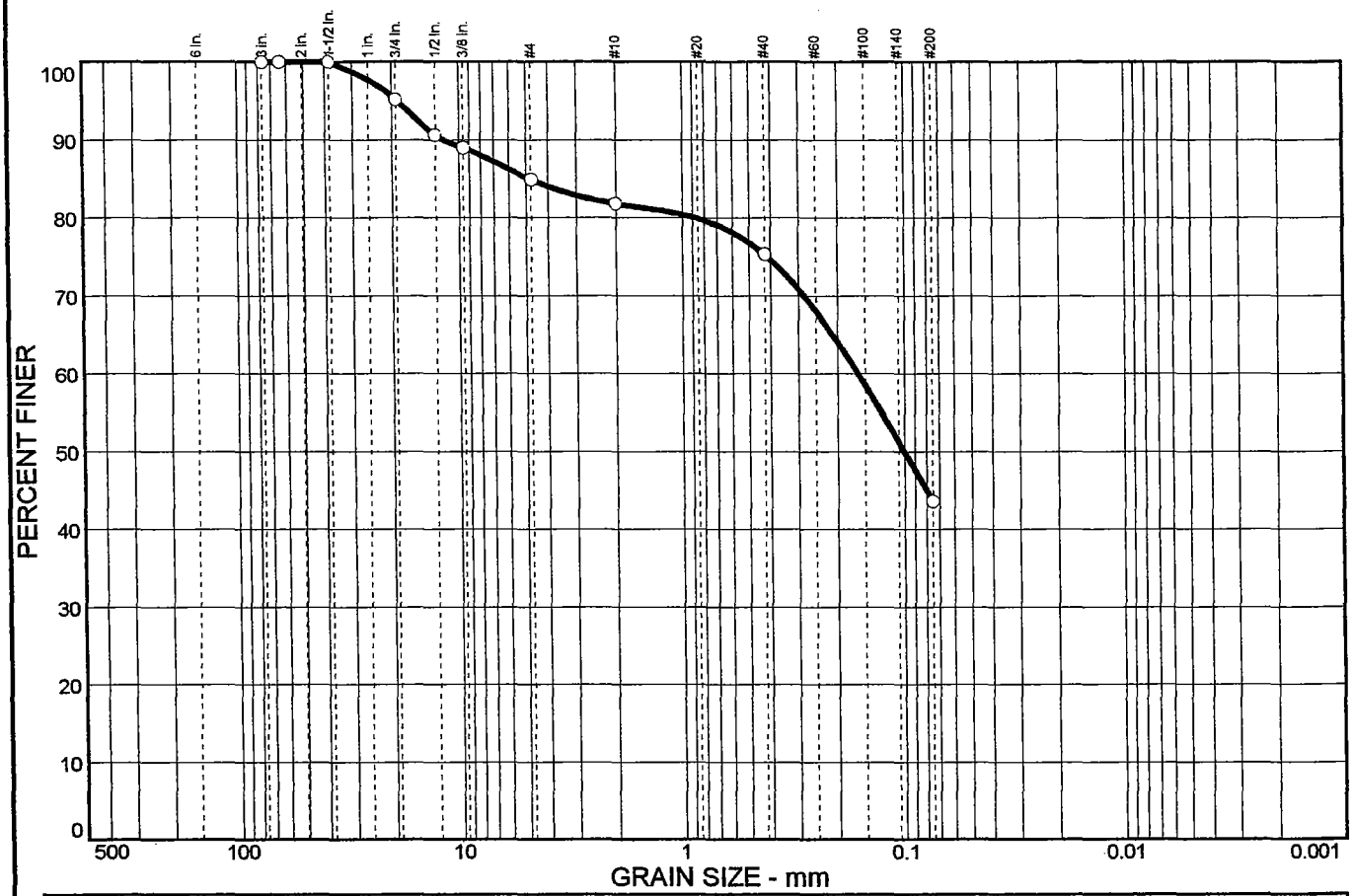
A total of fifty-four (54) in place field density tests, numbered 01 through 54 inclusive, were performed per ASTM D-2922 using a nuclear gauge on the backfill for hole #3, located in Indian Head, Maryland. All tests passed the required ninety percent of compaction per AASHTO T-180 and/or ASTM D-698.

Respectfully Submitted,

Robert F. Taylor, P.E.
President

STATE OF MARYLAND
ROBERT FULTON TAYLOR
No. 11043
PROFESSIONAL ENGINEER

PARTICLE SIZE DISTRIBUTION TEST REPORT



% COBBLES	% GRAVEL		% SAND			% FINES	
	CRS.	FINE	CRS.	MEDIUM	FINE	SILT	CLAY
0.0	4.8	10.3	3.1	6.5	31.7	43.6	

SIEVE SIZE	PERCENT FINER	SPEC.* PERCENT	PASS? (X=NO)
3	100.0		
2.5	100.0		
1.5	100.0		
3/4	95.2		
1/2	90.6		
3/8	89.0		
#4	84.9		
#10	81.8		
#40	75.3		
#200	43.6		

* (no specification provided)

Soil Description

Silty sand with gravel

Atterberg Limits

PL= 26 LL= 39 PI= 13

Coefficients

D_{85}= 4.84 D_{60}= 0.161 D_{50}= 0.100
D_{30}= D_{15}= D_{10}=
C_u= C_c=

Classification

USCS= SM AASHTO= A-6(3)

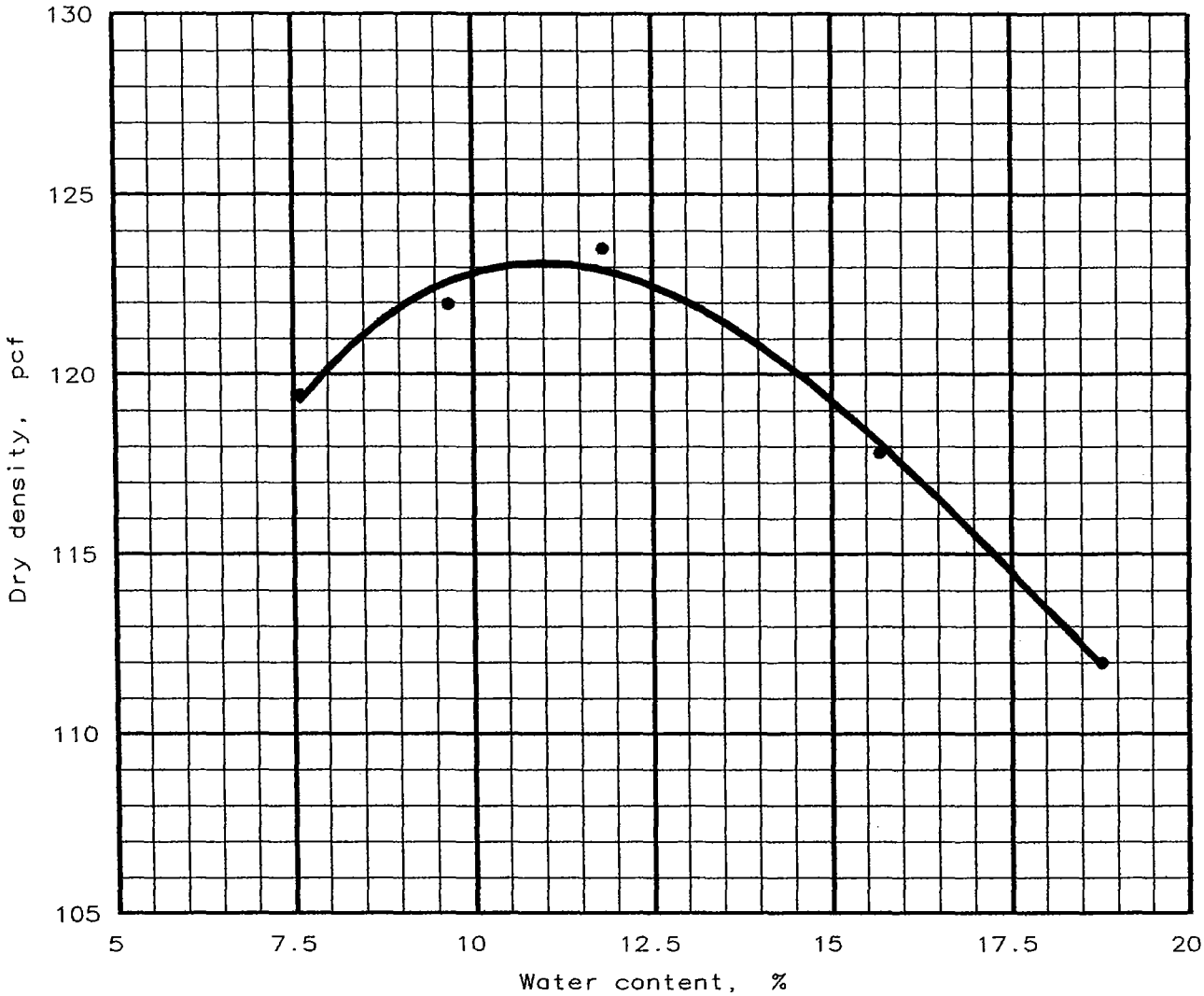
Remarks

Sample No.: 01 **Source of Sample:** **Date:** 06/21/06
Location: **Elev./Depth:**

BOB TAYLOR ENGINEERING, INC.

Client: SHAW E & I
Project: SITE 57
Project No: 06-328 **Page**

MOISTURE-DENSITY RELATIONSHIP TEST



Test specification: AASHTO T 180 Method A, Modified

Elev/ Depth	Classification		Nat. Moist.	Sp.G.	LL	PI	% > No.4	% < No.200
	USCS	AASHTO						
	SM	A-6(3)	13.6 %		39	13	15.1 %	43.6 %

TEST RESULTS	MATERIAL DESCRIPTION
Maximum dry density = 123.5 pcf Optimum moisture = 11.8 %	Tan Silty Sand with Gravel

Project No.: 06-328
Project: SITE 57
Location:

Date: 06/26/06

Remarks:
SAMPLE NO. 01

MOISTURE-DENSITY RELATIONSHIP TEST

BOB TAYLOR ENGINEERING, INC.

Fig. No. 328

BOB TAYLOR ENGINEERING, INC.
22688 Three Notch Road
Lexington Park, Maryland 20653
(301) 862-4300
(301) 932-5575

COMPACTION REPORT

JOB NO.: 06-328 BLDG TECHNICIAN: B. HUNT

TYPE OF MATERIAL: SANDY CLAY LOAM

DATA					
DATE	06/16/06	06/16/06	06/16/06	06/16/06	06/16/06
FIELD TEST NUMBER	1	2	3	4	5
SEE DATED FIELD REPORT(S) FOR TEST LOCATION(S)					
PROPOSED HEIGHT AT POINT OF TEST	F.G.	F.G.	F.G.	F.G.	F.G.
HEIGHT OF FILL AT POINT OF TEST	FG - 5'	FG - 5'	FG - 4'	FG - 4'	FG - 3'
% COMPACTION REQUIRED	90.0	90.0	90.0	90.0	90.0
% COMPACTION OBTAINED	95.5%	96.8%	96.7%	91.6%	92.6%
IN-PLACE DENSITY DETERMINATION					
1. WET SOIL WT + CONTAINER WT					
2. CONTAINER WT					
3. TOTAL WET SOIL WT FROM TEST HOLE					
4. DRY SAND DENSITY (LBS/CU FT)	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE
5. INITIAL DRY SAND WT + CONTAINER WT					
6. FINAL DRY SAND WT + CONTAINER WT					
7. DRY SAND WT IN HOLE + SAND IN CONE					
8. DRY SAND WT IN CONE					
9. DRY SAND WT IN HOLE					
10. VOLUME OF TEST HOLE					
11. IN-PLACE WET DENSITY (LBS/CU FT)	108.7	109.1	107.9	104.5	106.2
12. IN-PLACE DRY DENSITY (LBS/CU FT)	92.2	93.4	93.3	88.4	89.4
MAXIMUM DENSITY					
13. MAX DRY DENSITY (LBS/CU FT)	96.5	96.5	96.5	96.5	96.5
13A. OPTIMUM MOISTURE, %	23.8	23.8	23.8	23.8	23.8
MOISTURE CONTENT					
14. WET SOIL WT (GRAMS)					
15. DRY SOIL WT (GRAMS)					
16. MOISTURE WT (GRAMS)					
17. MOISTURE %	17.9%	16.8%	15.7%	18.3%	18.8%

BOB TAYLOR ENGINEERING, INC.
22688 Three Notch Road
Lexington Park, Maryland 20653
(301) 862-4300
(301) 932-5575

COMPACTION REPORT

JOB NO.: 06-328 BLDG TECHNICIAN: B. HUNT

TYPE OF MATERIAL: SANDY CLAY LOAM

DATA					
DATE	06/16/06	06/16/06	06/16/06	06/16/06	06/16/06
FIELD TEST NUMBER	6	7	8	9	10
SEE DATED FIELD REPORT(S) FOR TEST LOCATION(S)					
PROPOSED HEIGHT AT POINT OF TEST	F.G.	F.G.	F.G.	F.G.	F.G.
HEIGHT OF FILL AT POINT OF TEST	FG - 3'	FG - 2'	FG - 2'	FG - 1'	FG - 1'
% COMPACTION REQUIRED	90.0	90.0	90.0	90.0	90.0
% COMPACTION OBTAINED	90.8%	97.6%	97.8%	90.9%	95.4%
IN-PLACE DENSITY DETERMINATION					
1. WET SOIL WT + CONTAINER WT					
2. CONTAINER WT					
3. TOTAL WET SOIL WT FROM TEST HOLE					
4. DRY SAND DENSITY (LBS/CU FT)	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE
5. INITIAL DRY SAND WT + CONTAINER WT					
6. FINAL DRY SAND WT + CONTAINER WT					
7. DRY SAND WT IN HOLE + SAND IN CONE					
8. DRY SAND WT IN CONE					
9. DRY SAND WT IN HOLE					
10. VOLUME OF TEST HOLE					
11. IN-PLACE WET DENSITY (LBS/CU FT)	102.7	111.8	110.4	106.8	108.5
12. IN-PLACE DRY DENSITY (LBS/CU FT)	87.6	94.2	94.4	87.7	92.1
MAXIMUM DENSITY					
13. MAX DRY DENSITY (LBS/CU FT)	96.5	96.5	96.5	96.5	96.5
13A.OPTIMUM MOISTURE, %	23.8	23.8	23.8	23.8	23.8
MOISTURE CONTENT					
14. WET SOIL WT (GRAMS)					
15. DRY SOIL WT (GRAMS)					
16. MOISTURE WT (GRAMS)					
17. MOISTURE %	17.2%	18.8%	17.0%	19.0%	17.8%

BOB TAYLOR ENGINEERING, INC.
22688 Three Notch Road
Lexington Park, Maryland 20653
(301) 862-4300
(301) 932-5575

COMPACTION REPORT

JOB NO.: 06-328 BLDG TECHNICIAN: B. HUNT, A. MCKEEN

TYPE OF MATERIAL: SANDY CLAY LOAM

DATA					
DATE	06/16/06	06/16/06	06/30/06	06/30/06	06/30/06
FIELD TEST NUMBER	11	12	13	14	15
SEE DATED FIELD REPORT(S) FOR TEST LOCATION(S)					
PROPOSED HEIGHT AT POINT OF TEST	F.G.	F.G.	F.S.G.	F.S.G.	F.S.G.
HEIGHT OF FILL AT POINT OF TEST	F.G.	F.G.	FSG - 5'	FSG - 5'	FSG - 4'
% COMPACTION REQUIRED	90.0	90.0	90.0	90.0	90.0
% COMPACTION OBTAINED	99.9%	99.5%	96.3%	97.8%	97.8%
IN-PLACE DENSITY DETERMINATION					
1. WET SOIL WT + CONTAINER WT					
2. CONTAINER WT					
3. TOTAL WET SOIL WT FROM TEST HOLE					
4. DRY SAND DENSITY (LBS/CU FT)	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE
5. INITIAL DRY SAND WT + CONTAINER WT					
6. FINAL DRY SAND WT + CONTAINER WT					
7. DRY SAND WT IN HOLE + SAND IN CONE					
8. DRY SAND WT IN CONE					
9. DRY SAND WT IN HOLE					
10. VOLUME OF TEST HOLE					
11. IN-PLACE WET DENSITY (LBS/CU FT)	114.5	114.4	111.0	112.5	113.1
12. IN-PLACE DRY DENSITY (LBS/CU FT)	96.4	96.0	92.9	94.4	94.4
MAXIMUM DENSITY					
13. MAX DRY DENSITY (LBS/CU FT)	96.5	96.5	96.5	96.5	96.5
13A. OPTIMUM MOISTURE, %	23.8	23.8	23.8	23.8	23.8
MOISTURE CONTENT					
14. WET SOIL WT (GRAMS)					
15. DRY SOIL WT (GRAMS)					
16. MOISTURE WT (GRAMS)					
17. MOISTURE %	18.7%	19.2%	19.5%	19.2%	19.8%

BOB TAYLOR ENGINEERING, INC.
22688 Three Notch Road
Lexington Park, Maryland 20653
(301) 862-4300
(301) 932-5575

COMPACTION REPORT

JOB NO.: 06-328 BLDG TECHNICIAN: A. MCKEEN

TYPE OF MATERIAL: SANDY CLAY LOAM

DATA					
DATE	06/30/06	06/30/06	06/30/06	06/30/06	06/30/06
FIELD TEST NUMBER	16	17	18	19	20
SEE DATED FIELD REPORT(S) FOR TEST LOCATION(S)					
PROPOSED HEIGHT AT POINT OF TEST	F.S.G.	F.S.G.	F.S.G.	F.S.G.	F.S.G.
HEIGHT OF FILL AT POINT OF TEST	FSG - 4'	FSG - 4'	FSG - 4'	FSG - 3'	FSG - 3'
% COMPACTION REQUIRED	90.0	90.0	90.0	90.0	90.0
% COMPACTION OBTAINED	92.0%	94.0%	90.3%	94.8%	99.4%
IN-PLACE DENSITY DETERMINATION					
1. WET SOIL WT + CONTAINER WT					
2. CONTAINER WT					
3. TOTAL WET SOIL WT FROM TEST HOLE					
4. DRY SAND DENSITY (LBS/CU FT)	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE
5. INITIAL DRY SAND WT + CONTAINER WT					
6. FINAL DRY SAND WT + CONTAINER WT					
7. DRY SAND WT IN HOLE + SAND IN CONE					
8. DRY SAND WT IN CONE					
9. DRY SAND WT IN HOLE					
10. VOLUME OF TEST HOLE					
11. IN-PLACE WET DENSITY (LBS/CU FT)	106.2	104.8	100.9	108.1	117.2
12. IN-PLACE DRY DENSITY (LBS/CU FT)	88.8	90.7	87.1	91.5	95.9
MAXIMUM DENSITY					
13. MAX DRY DENSITY (LBS/CU FT)	96.5	96.5	96.5	96.5	96.5
13A. OPTIMUM MOISTURE, %	23.8	23.8	23.8	23.8	23.8
MOISTURE CONTENT					
14. WET SOIL WT (GRAMS)					
15. DRY SOIL WT (GRAMS)					
16. MOISTURE WT (GRAMS)					
17. MOISTURE %	19.6%	15.5%	15.8%	18.1%	22.2%

BOB TAYLOR ENGINEERING, INC.
22688 Three Notch Road
Lexington Park, Maryland 20653
(301) 862-4300
(301) 932-5575

COMPACTION REPORT

JOB NO.: 06-328 BLDG TECHNICIAN: B. HUNT, A. MCKEEN

TYPE OF MATERIAL: REDDISH BROWN CLAYEY SAND

DATA					
DATE	06/30/06	06/30/06	06/30/06	06/30/06	06/30/06
FIELD TEST NUMBER	21	22	23	24	25
SEE DATED FIELD REPORT(S) FOR TEST LOCATION(S)					
PROPOSED HEIGHT AT POINT OF TEST	F.S.G.	F.S.G.	F.S.G.	F.S.G.	F.S.G.
HEIGHT OF FILL AT POINT OF TEST	FSG - 3'	FSG - 3'	FSG - 2'	FSG - 2'	FSG - 2'
% COMPACTION REQUIRED	90.0	90.0	90.0	90.0	90.0
% COMPACTION OBTAINED	98.7%	93.4%	93.9%	94.4%	96.6%
IN-PLACE DENSITY DETERMINATION					
1. WET SOIL WT + CONTAINER WT					
2. CONTAINER WT					
3. TOTAL WET SOIL WT FROM TEST HOLE					
4. DRY SAND DENSITY (LBS/CU FT)	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE
5. INITIAL DRY SAND WT + CONTAINER WT					
6. FINAL DRY SAND WT + CONTAINER WT					
7. DRY SAND WT IN HOLE + SAND IN CONE					
8. DRY SAND WT IN CONE					
9. DRY SAND WT IN HOLE					
10. VOLUME OF TEST HOLE					
11. IN-PLACE WET DENSITY (LBS/CU FT)	115.3	107.1	103.6	111.2	115.8
12. IN-PLACE DRY DENSITY (LBS/CU FT)	95.2	90.1	90.6	91.1	93.2
MAXIMUM DENSITY					
13. MAX DRY DENSITY (LBS/CU FT)	96.5	96.5	96.5	96.5	96.5
13A. OPTIMUM MOISTURE, %	23.8	23.8	23.8	23.8	23.8
MOISTURE CONTENT					
14. WET SOIL WT (GRAMS)					
15. DRY SOIL WT (GRAMS)					
16. MOISTURE WT (GRAMS)					
17. MOISTURE %	21.1%	18.9%	14.2%	22.1%	24.3%

BOB TAYLOR ENGINEERING, INC.
22688 Three Notch Road
Lexington Park, Maryland 20653
(301) 862-4300
(301) 932-5575

COMPACTION REPORT

JOB NO.: 06-328 BLDG TECHNICIAN: A. MCKEEN

TYPE OF MATERIAL: SANDY CLAY LOAM

DATA					
DATE	06/30/06	06/30/06	06/30/06	06/30/06	06/30/06
FIELD TEST NUMBER	26	27	28	29	30
SEE DATED FIELD REPORT(S) FOR TEST LOCATION(S)					
PROPOSED HEIGHT AT POINT OF TEST	F.S.G.	F.S.G.	F.S.G.	F.S.G.	F.S.G.
HEIGHT OF FILL AT POINT OF TEST	FSG - 2'	FSG - 1'	FSG - 1'	FSG - 1'	F.S.G.
% COMPACTION REQUIRED	90.0	90.0	90.0	90.0	90.0
% COMPACTION OBTAINED	100.2%	92.4%	92.5%	96.8%	100.0%
IN-PLACE DENSITY DETERMINATION					
1. WET SOIL WT + CONTAINER WT					
2. CONTAINER WT					
3. TOTAL WET SOIL WT FROM TEST HOLE					
4. DRY SAND DENSITY (LBS/CU FT)	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE
5. INITIAL DRY SAND WT + CONTAINER WT					
6. FINAL DRY SAND WT + CONTAINER WT					
7. DRY SAND WT IN HOLE + SAND IN CONE					
8. DRY SAND WT IN CONE					
9. DRY SAND WT IN HOLE					
10. VOLUME OF TEST HOLE					
11. IN-PLACE WET DENSITY (LBS/CU FT)	118.7	105.9	104.6	112.3	115.9
12. IN-PLACE DRY DENSITY (LBS/CU FT)	96.7	89.2	89.3	93.4	96.5
MAXIMUM DENSITY					
13. MAX DRY DENSITY (LBS/CU FT)	96.5	96.5	96.5	96.5	96.5
13A.OPTIMUM MOISTURE, %	23.8	23.8	23.8	23.8	23.8
MOISTURE CONTENT					
14. WET SOIL WT (GRAMS)					
15. DRY SOIL WT (GRAMS)					
16. MOISTURE WT (GRAMS)					
17. MOISTURE %	22.7%	18.7%	17.1%	20.2%	20.0%

BOB TAYLOR ENGINEERING, INC.
22688 Three Notch Road
Lexington Park, Maryland 20653
(301) 862-4300
(301) 932-5575

COMPACTION REPORT

JOB NO.: 06-328 BLDG TECHNICIAN: A. MCKEEN, J. HARPER

TYPE OF MATERIAL: SANDY CLAY LOAM

DATA					
DATE	06/30/06	06/30/06	07/05/06	07/05/06	07/05/06
FIELD TEST NUMBER	31	32	33	34	35
SEE DATED FIELD REPORT(S) FOR TEST LOCATION(S)					
PROPOSED HEIGHT AT POINT OF TEST	F.S.G.	F.S.G.	F.G.	F.G.	F.G.
HEIGHT OF FILL AT POINT OF TEST	F.S.G.	F.S.G.	FG - 5'	FG - 5'	FG - 4'
% COMPACTION REQUIRED	90.0	90.0	90.0	90.0	90.0
% COMPACTION OBTAINED	98.7%	98.2%	96.5%	99.6%	97.8%
IN-PLACE DENSITY DETERMINATION					
1. WET SOIL WT + CONTAINER WT					
2. CONTAINER WT					
3. TOTAL WET SOIL WT FROM TEST HOLE					
4. DRY SAND DENSITY (LBS/CU FT)	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE
5. INITIAL DRY SAND WT + CONTAINER WT					
6. FINAL DRY SAND WT + CONTAINER WT					
7. DRY SAND WT IN HOLE + SAND IN CONE					
8. DRY SAND WT IN CONE					
9. DRY SAND WT IN HOLE					
10. VOLUME OF TEST HOLE					
11. IN-PLACE WET DENSITY (LBS/CU FT)	113.7	115.6	107.3	117.3	116.0
12. IN-PLACE DRY DENSITY (LBS/CU FT)	95.2	94.8	93.1	96.1	94.4
MAXIMUM DENSITY					
13. MAX DRY DENSITY (LBS/CU FT)	96.5	96.5	96.5	96.5	96.5
13A.OPTIMUM MOISTURE, %	23.8	23.8	23.8	23.8	23.8
MOISTURE CONTENT					
14. WET SOIL WT (GRAMS)					
15. DRY SOIL WT (GRAMS)					
16. MOISTURE WT (GRAMS)					
17. MOISTURE %	19.4%	21.9%	15.3%	22.1%	22.9%

BOB TAYLOR ENGINEERING, INC.
22688 Three Notch Road
Lexington Park, Maryland 20653
(301) 862-4300
(301) 932-5575

COMPACTION REPORT

JOB NO.: 06-328 BLDG TECHNICIAN: J. HARPER

TYPE OF MATERIAL: SANDY CLAY LOAM

DATA					
DATE	07/05/06	07/05/06	07/05/06	07/05/06	07/05/06
FIELD TEST NUMBER	36	37	38	39	40
SEE DATED FIELD REPORT(S) FOR TEST LOCATION(S)					
PROPOSED HEIGHT AT POINT OF TEST	F.G.	F.G.	F.G.	F.G.	F.G.
HEIGHT OF FILL AT POINT OF TEST	FG - 4'	FG - 3'	FG - 2'	FG - 1'	FG - 1'
% COMPACTION REQUIRED	90.0	90.0	90.0	90.0	90.0
% COMPACTION OBTAINED	95.5%	95.0%	93.6%	94.0%	99.7%
IN-PLACE DENSITY DETERMINATION					
1. WET SOIL WT + CONTAINER WT					
2. CONTAINER WT					
3. TOTAL WET SOIL WT FROM TEST HOLE					
4. DRY SAND DENSITY (LBS/CU FT)	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE
5. INITIAL DRY SAND WT + CONTAINER WT					
6. FINAL DRY SAND WT + CONTAINER WT					
7. DRY SAND WT IN HOLE + SAND IN CONE					
8. DRY SAND WT IN CONE					
9. DRY SAND WT IN HOLE					
10. VOLUME OF TEST HOLE					
11. IN-PLACE WET DENSITY (LBS/CU FT)	110.3	110.7	107.9	108.8	117.6
12. IN-PLACE DRY DENSITY (LBS/CU FT)	92.2	91.7	90.3	90.7	96.2
MAXIMUM DENSITY					
13. MAX DRY DENSITY (LBS/CU FT)	96.5	96.5	96.5	96.5	96.5
13A. OPTIMUM MOISTURE, %	23.8	23.8	23.8	23.8	23.8
MOISTURE CONTENT					
14. WET SOIL WT (GRAMS)					
15. DRY SOIL WT (GRAMS)					
16. MOISTURE WT (GRAMS)					
17. MOISTURE %	19.6%	20.7%	19.5%	20.0%	22.2%

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COMPACTION REPORT

JOB NO.: 06-328 BLDG TECHNICIAN: J. HARPER

TYPE OF MATERIAL: SANDY CLAY LOAM

DATA					
DATE	07/05/06	07/05/06	07/08/06	07/08/06	07/08/06
FIELD TEST NUMBER	41	42	43	44	45
SEE DATED FIELD REPORT(S) FOR TEST LOCATION(S)					
PROPOSED HEIGHT AT POINT OF TEST	F.G.	F.G.	F.G.	F.G.	F.G.
HEIGHT OF FILL AT POINT OF TEST	F.G.	F.G.	FG-3'	FG-3'	FG-3'
% COMPACTION REQUIRED	90.0	90.0	90.0	90.0	90.0
% COMPACTION OBTAINED	91.5%	91.4%	93.8%	95.5%	94.3%
IN-PLACE DENSITY DETERMINATION					
1. WET SOIL WT + CONTAINER WT					
2. CONTAINER WT					
3. TOTAL WET SOIL WT FROM TEST HOLE					
4. DRY SAND DENSITY (LBS/CU FT)	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE
5. INITIAL DRY SAND WT + CONTAINER WT					
6. FINAL DRY SAND WT + CONTAINER WT					
7. DRY SAND WT IN HOLE + SAND IN CONE					
8. DRY SAND WT IN CONE					
9. DRY SAND WT IN HOLE					
10. VOLUME OF TEST HOLE					
11. IN-PLACE WET DENSITY (LBS/CU FT)	101.1	101.7	129.3	131.4	129.5
12. IN-PLACE DRY DENSITY (LBS/CU FT)	88.3	88.2	115.8	117.9	116.4
MAXIMUM DENSITY					
13. MAX DRY DENSITY (LBS/CU FT)	96.5	96.5	123.5	123.5	123.5
13A. OPTIMUM MOISTURE, %	23.8	23.8	11.8	11.8	11.8
MOISTURE CONTENT					
14. WET SOIL WT (GRAMS)					
15. DRY SOIL WT (GRAMS)					
16. MOISTURE WT (GRAMS)					
17. MOISTURE %	14.5%	15.3%	11.7%	11.5%	11.3%

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22688 Three Notch Road
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(301) 862-4300
(301) 932-5575

COMPACTION REPORT

JOB NO.: 06-328 BLDG TECHNICIAN: J. HARPER

TYPE OF MATERIAL: SANDY CLAY LOAM

DATA					
DATE	07/08/06	07/08/060	07/08/06	07/08/06	07/08/06
FIELD TEST NUMBER	46	47	48	49	50
SEE DATED FIELD REPORT(S) FOR TEST LOCATION(S)					
PROPOSED HEIGHT AT POINT OF TEST	F.G.	F.G.	F.G.	F.G.	F.G.
HEIGHT OF FILL AT POINT OF TEST	FG-2'4"	FG-2'4"	FG-2'4"	FG-1'8"	FG-1'8"
% COMPACTION REQUIRED	90.0	90.0	90.0	90.0	90.0
% COMPACTION OBTAINED	94.7%	95.0%	95.6%	94.7%	96.1%
IN-PLACE DENSITY DETERMINATION					
1. WET SOIL WT + CONTAINER WT					
2. CONTAINER WT					
3. TOTAL WET SOIL WT FROM TEST HOLE					
4. DRY SAND DENSITY (LBS/CU FT)	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE
5. INITIAL DRY SAND WT + CONTAINER WT					
6. FINAL DRY SAND WT + CONTAINER WT					
7. DRY SAND WT IN HOLE + SAND IN CONE					
8. DRY SAND WT IN CONE					
9. DRY SAND WT IN HOLE					
10. VOLUME OF TEST HOLE					
11. IN-PLACE WET DENSITY (LBS/CU FT)	129.7	130.7	131.6	130.7	132.3
12. IN-PLACE DRY DENSITY (LBS/CU FT)	116.9	117.3	118.1	117.0	118.7
MAXIMUM DENSITY					
13. MAX DRY DENSITY (LBS/CU FT)	123.5	123.5	123.5	123.5	123.5
13A.OPTIMUM MOISTURE, %	11.8	11.8	11.8	11.8	11.8
MOISTURE CONTENT					
14. WET SOIL WT (GRAMS)					
15. DRY SOIL WT (GRAMS)					
16. MOISTURE WT (GRAMS)					
17. MOISTURE %	11.0%	11.4%	11.1%	11.7%	11.5%

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(301) 932-5575

COMPACTION REPORT

JOB NO.: 06-328 BLDG TECHNICIAN: J. HARPER

TYPE OF MATERIAL: SANDY CLAY LOAM

DATA					
DATE	07/08/06	07/08/060	07/08/06	07/08/06	
FIELD TEST NUMBER	51	52	53	54	
SEE DATED FIELD REPORT(S) FOR TEST LOCATION(S)					
PROPOSED HEIGHT AT POINT OF TEST	F.G.	F.G.	F.G.	F.G.	
HEIGHT OF FILL AT POINT OF TEST	FG-2'4"	FG-2'4"	FG-2'4"	FG-1'8"	
% COMPACTION REQUIRED	90.0	90.0	90.0	90.0	
% COMPACTION OBTAINED	93.4%	96.6%	95.8%	91.8%	#DIV/0!
IN-PLACE DENSITY DETERMINATION					
1. WET SOIL WT + CONTAINER WT					
2. CONTAINER WT					
3. TOTAL WET SOIL WT FROM TEST HOLE					
4. DRY SAND DENSITY (LBS/CU FT)	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE	NUCLEAR GAUGE
5. INITIAL DRY SAND WT + CONTAINER WT					
6. FINAL DRY SAND WT + CONTAINER WT					
7. DRY SAND WT IN HOLE + SAND IN CONE					
8. DRY SAND WT IN CONE					
9. DRY SAND WT IN HOLE					
10. VOLUME OF TEST HOLE					
11. IN-PLACE WET DENSITY (LBS/CU FT)	128.4	133.0	130.9	125.7	
12. IN-PLACE DRY DENSITY (LBS/CU FT)	115.4	119.3	118.3	113.4	
MAXIMUM DENSITY					
13. MAX DRY DENSITY (LBS/CU FT)	123.5	123.5	123.5	123.5	
13A. OPTIMUM MOISTURE, %	11.8	11.8	11.8	11.8	
MOISTURE CONTENT					
14. WET SOIL WT (GRAMS)					
15. DRY SOIL WT (GRAMS)					
16. MOISTURE WT (GRAMS)					
17. MOISTURE %	11.3%	11.5%	10.7%	10.8%	

BOB TAYLOR ENGINEERING, INC.
22688 Three Notch Road
Lexington Park, Maryland 20653
301-862-4300
301-932-5575

JOB NO.	06-328 BLDG
DATE	06/16/06
PROJECT	SITE 57 INDIAN HEAD, MARYLAND
PERMIT NO.	
PRESENT AT SITE	BRICE HUNT
BILLABLE TIME	7.0 HOURS

SHAW E & I

P.O. BOX 827

INDIAN HEAD, MARYLAND 20640

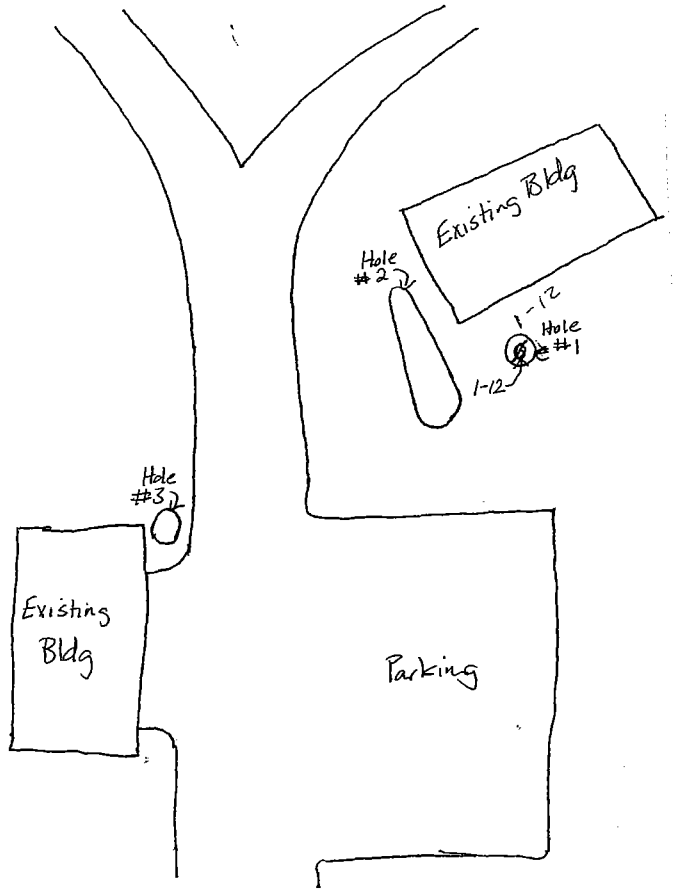
FIELD REPORT

Twelve (12) in-place field density tests, numbered 01 through 12 inclusive, were performed per ASTM D-2922 using a nuclear gauge on the backfill for hole #1. All tests achieved the required ninety percent of compaction per ASTM D-698. These test locations are shown below.

One (01) soil sample labeled 01 was collected per ASTM D-75 from the silty sand with gravel material. This sample will be laboratory tested per ASTM D-2487 and per ASTM D-698 according to the project specifications.

Key

ϕ In-Place Field Density Test



BT	ARS	Brice Hunt	6-16-06
REVIEWER'S INITIALS	TYPIST	TECHNICIAN'S SIGNATURE	DATE

BOB TAYLOR ENGINEERING, INC.
22688 Three Notch Road
Lexington Park, Maryland 20653
301-862-4300
301-932-5575

JOB NO.	06-328 BLDG
DATE	06/30/06
PROJECT	SITE 57 INDIAN HEAD, MARYLAND
PERMIT NO.	
PRESENT AT SITE	ANDY MCKEEN
BILLABLE TIME	7.0 HOURS

SHAW E & I

P.O. BOX 827

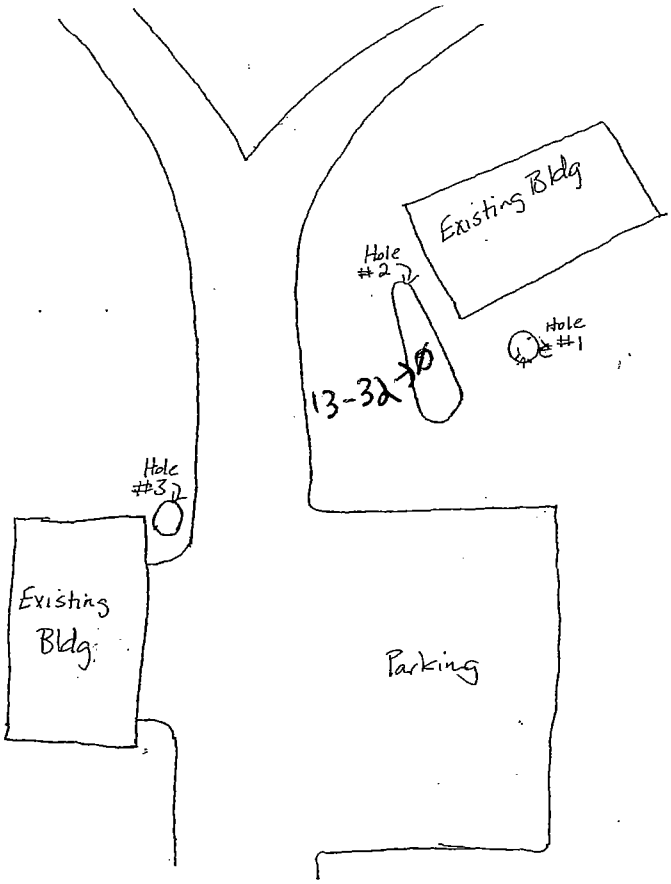
INDIAN HEAD, MARYLAND 20640

FIELD REPORT

Twenty (20) in-place field density tests, numbered 13 through 32 inclusive, were performed per ASTM D-2922 using a nuclear gauge on the backfill for hole #2. All tests achieved the required ninety percent of compaction per ASTM D-698. These test locations are shown below.

Key

ϕ In-Place Field Density Test



REVIEWER'S INITIALS

ARS
TYPIST

300

TECHNICIAN'S SIGNATURE

6/30/06
DATE

BOB TAYLOR ENGINEERING, INC.
22688 Three Notch Road
Lexington Park, Maryland 20653
301-862-4300
301-932-5575

JOB NO.	06-328 BLDG
DATE	07/08/06
PROJECT	SITE 57 INDIAN HEAD, MARYLAND
PERMIT NO.	
PRESENT AT SITE	WILL DOUGHTY
BILLABLE TIME	4.5 HOURS

SHAW E & I

P.O. BOX 827

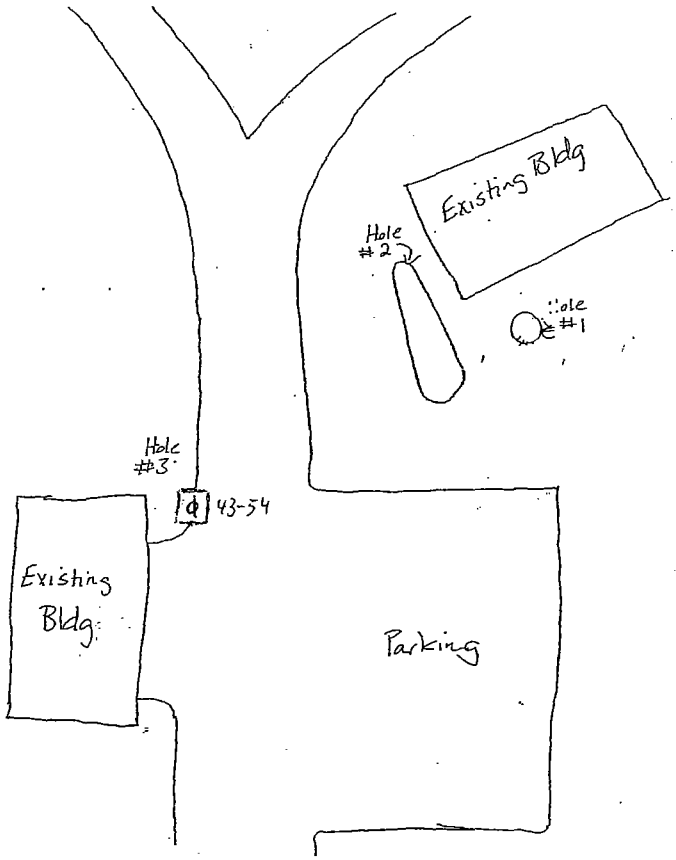
INDIAN HEAD, MARYLAND 20640

FIELD REPORT

Twelve (12) in-place field density tests, numbered 43 through 54 inclusive, were performed per ASTM D-2922 using a nuclear gauge on hole #3. All tests achieved the required ninety percent of compaction per AASHTO T-180. These test locations are shown below.

Key

ϕ In-Place Field Density Test



REVIEWER'S INITIALS	TYPIST	TECHNICIAN'S SIGNATURE	DATE
BT	ARS		7/8/06

BOB TAYLOR ENGINEERING, INC.
22688 Three Notch Road
Lexington Park, Maryland 20653
301-862-4300
301-932-5575

JOB NO.	06-328 BLDG
DATE	07/05/06
PROJECT	SITE 57 INDIAN HEAD, MARYLAND
PERMIT NO.	
PRESENT AT SITE	JESSE HARPER
BILLABLE TIME	7.0 HOURS

SHAW E & I

P.O. BOX 827

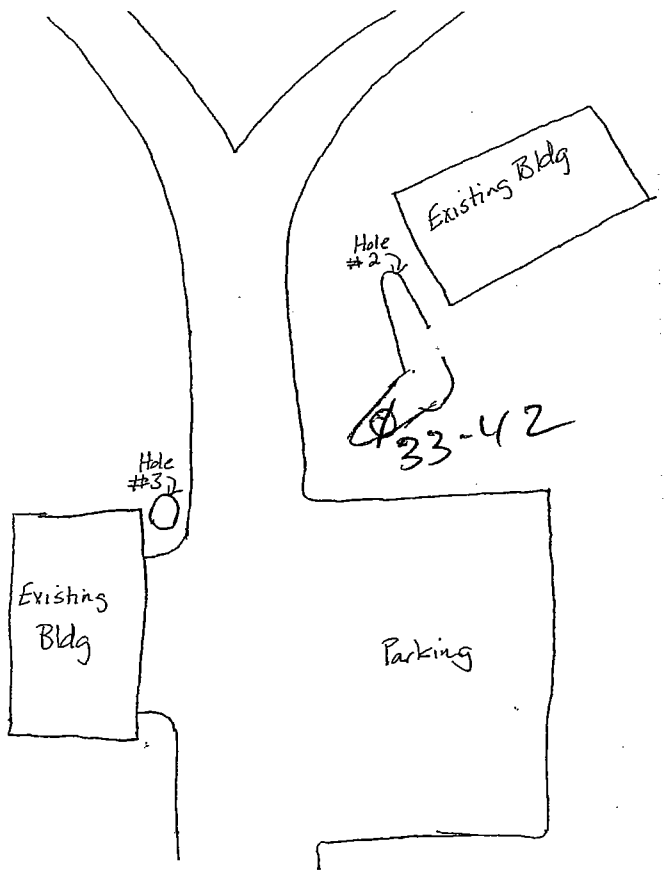
INDIAN HEAD, MARYLAND 20640

FIELD REPORT

Ten (10) in-place field density tests, numbered 33 through 42 inclusive, were performed per ASTM D-2922 using a nuclear gauge on the backfill for drive access. All tests achieved the required ninety percent of compaction per ASTM D-698. These test locations are shown below.

Key

ϕ In-Place Field Density Test



REVIEWER'S INITIALS	TYPIST	TECHNICIAN'S SIGNATURE	DATE
	ARS		7/5/06

ATTACHMENT A
FIELD FORM

FIELD FORM

Contract No. N62470-03-D-4402
Task Order No. FSSI # 025
Title/Location
Site 57
Indian Head, Maryland

DISTRIBUTION:
☐ CONTRACTING OFFICER/SPECIALIST (TD'S)
☒ ROICC
☒ RPM
☐ COTR:
OTHER: _____
FILE: 120359

Form No. VR/RFI/TD VR-01		**Date:** 05-31-06	**Respond *NLT:** 06-02-06
Initiated By:	☐ **Navy**	☒ **Contractor**	☐ **Other**
☐ **Technical Direction**	☐ **RFI**	☒ **Variance Request**	☐ **Overtime Authorization**

Description (Include location & attachments if necessary):
FSSI/Shaw is requesting a variance to the Site 57 Removal Action Plan to abandon 6 monitoring wells (MWs) that are located within the limits of excavation. This task was not listed in the original scope of work.

Attachment ☐

Drawing Ref: NA | Spec. Ref: NA

Explanation/Recommendation:
The MWs (03,04,07,08,24 and 25) all fall within the excavation limits and/or the sloping required for safe excavation. FSSI/Shaw proposed to have a state certified well driller abandon the wells in accordance with state regulatory requirements and provide copies of the reports that will be filed with the state of Maryland for MW abandonment. At the guidance of the Navy, no installation of MWs will be required at Site 57.

☒ **Scope Increase**
☐ **Scope Decrease**
☐ **No Change in Scope**

Cost impact, fee excluded:
☐ None
☒ Cost Increase
☐ Cost Decrease
Rough Order of Magnitude: $3,000.00

WBS Codes Affected:
New ☒ Existing ☐
02004000

Schedule Impact (assume response by *NLT date)
☒ None
☐ Increase in Time
☐ Decrease in Time
Approximate Calendar Days:

Contractor:	Signature	Date
Site Representative:	[signature]	05-31-06
Project Manager:	[signature]	05-31-06

Reviewer Comments, incl RFI Response:

Navy Concurrence:	Signature	Date
ROICC:	[signature]	6/7/06
RPM/EIC	[signature]	6/7/06

☐ Task Order Modification to Follow (contract action) ☐ No Task Order Modification Required

SECTION 3.0
BI-WEEKLY QC MEETINGS

QC Meeting Minutes
Bi-Weekly QC Meeting
06/07/06
Work performed from 05/30/06 to 06/06/06
Contract #N62470-03-D-4402 Task Order No. 25
Interim Removal Action at Site 57 – Building 292 TCE Contamination

Meeting to be conducted by: Adam Forshey, Shaw

Jeff Morris, NAVFAC WASH
Shawn Jorgensen, NSF-IH
Cathy Gardner, ROICC-IH
Jim Desmond, ROICC-IH
Steve Carriere, Shaw
Bill Simpson, FSSI
Cano Hernandez, Shaw

1. RESULTS OF REVIEW OF THE PREVIOUS QC MEETING MINUTES
First QC meeting for Site 57

2. VARIANCE REQUEST/REQUEST FOR INFORMATION/WORK DIRECTIVES STATUS:
2a. Variance Request and Request for Information Approved Since Last Meeting/Pending Approval

VR/RFI	DATE INITIATED	DESCRIPTION	STATUS

2b. Concurrence Letters Approved since Last Meeting/Pending Approval

CL No.	DATE INITIATED	DESCRIPTION	STATUS
		None	

2c. Proposed Changes Approved since Last Meeting/Pending Approval

PC No.	DATE INITIATED	DESCRIPTION	STATUS
PC-01	06-02-06	Abandonment of 6 Monitoring Wells	VR-01 Approved, PC-01 Pending Approval

3. SCHEDULE AND STATUS OF WORK:
3a. Work accomplished since last meeting

DEFINABLE FEATURE	ACTIVITY	PREPARATORY PHASE DATE	INITIAL PHASE DATE	FOLLOW-UP STATUS	ACTIVITY SCHEDULED COMPLETION
01	Mobilization of crew and equipment to site	05/31/06	05/31/06	All personnel and equipment mobilized to site	05/31/06
02	Site Setup – Includes photo documentation, utility search, decon pad construction, and material storage pad construction	05/31/06	05/31/06	Photo documentation and utility search has been completed (by subcontractor and Miss Utilities). Construction of pads in progress.	06/06/06
03	Utility Relocation – Relocation of smoking gazebo to outside the limits of disturbance	05/31/06	06/05/06	Gazebo has been moved	06/05/06
04	Installation of Erosion and Sediment Control	05/31/06	06/01/06	All silt fence, soil berms, straw bales, and high visibility fence have been installed. Waiting on rock for construction entrance to complete E&S	06/07/06

3b. Work to be accomplished before the next QC Meeting (includes both on-site and off-site work and testing).

SCHEDULED PREPARATORY PHASES PRIOR TO NEXT MEETING	SCHEDULED DATE
Field Sampling/Off-site Analysis	06/12/06
Material Excavation & Handling	06/07/06

4. REWORK STATUS

4a. Rework items identified and pending correction

DATE IDENTIFIED	DESCRIPTION OF REWORK REQUIRED	ESTIMATED COMPLETION DATE
	None	

4b. Rework items completed since last meeting

DATE IDENTIFIED	DESCRIPTION OF REWORK REQUIRED	DATE COMPLETED
	None	

5. STATUS OF SUBMITTALS:

5a. Submittals reviewed and approved since last meeting

SPEC. SECTION	TRANSMITTAL # AND SUBMITTAL DESCRIPTION	DATE APPROVED
Work Plan	Work Plan	05/18/06
Work Plan	Project Schedule (Appendix A)	05/18/06
Work Plan	Erosion and Sediment Control Plan (Appendix B)	05/18/06
Work Plan	Site Specific Health and Safety Plan (Appendix C)	05/18/06
Work Plan	Quality Control Plan (Appendix D)	05/18/06
Work Plan	Field Sampling and Analysis Plan (Appendix E)	05/18/06

5b. Submittals pending approval

SPEC. SECTION	TRANSMITTAL # AND SUBMITTAL DESCRIPTION	DATE SUBMITTED	DATE APPROVAL REQUIRED	REQUIRED BY GVMT OR CONTR
	None			

5c.Submittals required in the near future

SPEC. SECTION	SUBMITTAL DESCRIPTION	ANTICIPATED DATE TO BE SUBMITTED	ESTIMATED DATE REQUIRED	GVMT OR CONTR APPROVAL
Work Plan	Waste Characterization Analysis	06/19/06	06/22/06	GVMT
Work Plan	Backfill Chemical Analysis	06/19/06	06/27/06	GVMT
Work Plan	Topsoil Chemical Analysis	06/19/06	06/27/06	GVMT
Work Plan	Backfill Geotechnical Analysis	06/19/06	06/27/06	GVMT

6. TESTING:

6a. Testing performed since last meeting

SPEC. SECTION	DESCRIPTION OF TEST	DATE COMPLETED
	None	

6b. Testing scheduled prior to next meeting

SPEC. SECTION	DESCRIPTION OF TEST	SCHEDULED DATE
Work Plan	Waste Characterization Sampling	06/12/06

6c.Testing results pending/received since last meeting

SPEC. SECTION	DESCRIPTION OF TEST	STATUS
	None	

7. DOCUMENTATION:

Documentation required prior to next meeting

DOCUMENTATION DESCRIPTION	DATE REQUIRED
Daily Reports	Daily
QC Meeting Minutes	06/09/06

8. STATUS OF AS-BUILTS: (Define changes made since last meeting and provide an explanation for as-built drawings that are not up-to-date).

None.

9. QC AND PRODUCTION ISSUES DISCUSSED AND RELATED RESOLUTIONS:

Total Days of Weather Delay to Date	Days of Weather Delay this Period
0.0	0.0

Total Days of UXO Delay to Date	Days of UXO Delay this Period
0.0	0.0

10. OTHER ITEMS DISCUSSED:

- Discussion of contractor taking Confirmation Samples from open excavations and submitting to TetraTech's Lab for analysis to minimize time for excavations to remain open.
- Addressed Shawn Jorgensen's concerns about supporting storm water drain during excavation.

11. ACTION ITEMS:

(Include items that may require revising the QC plan or changes in procedure)

A. Closure of service road adjacent to Building 292 during excavation of Area A
   - All loading can be performed from the front of Building 292. Should be no complications with closing the service road (Jim Desmond)

B. Grounding wire 3-5' around Building 292
   - If grounding wire is encountered, contact Jim Desmond. He has someone onsite who will be available if wire is exposed (Jim Desmond)

C. Troxler Density Testing

- Jeff Morris will speak with George Lotulip at TetraTech for finalization of this issue.

D. Weather and UXO Mod. Will be submitted at the end of this week for Sites 42 & 17.

E. Paul Miller from Gradient Technologies wants to see the UXO 32 site next week. Cathy Gardner will provide access to site, contact her for the key (Cathy Gardner).

12. DATE OF NEXT SCHEDULED QC MEETING:

Next scheduled QC meeting for Wednesday June 21, 2006 – 1300 Hours

QC Meeting Minutes
Bi-Weekly QC Meeting
06/21/06
Work performed from 06/07/06 to 06/20/06
Contract #N62470-03-D-4402 Task Order No. 25
Interim Removal Action at Site 57 – Building 292 TCE Contamination

Meeting was conducted by: Adam Forshey, Shaw

Cathy Gardner, ROICC-IH
Jim Desmond, ROICC-IH
Bill Simpson, FSSI
Shawn Jorgensen, NSF-IH
Steve Carriere (phone), Shaw
Cano Hernandez, Shaw

1. RESULTS OF REVIEW OF THE PREVIOUS QC MEETING MINUTES
None.

2. VARIANCE REQUEST/REQUEST FOR INFORMATION/WORK DIRECTIVES STATUS:
2a. Variance Request and Request for Information Approved Since Last Meeting/Pending Approval

VR/RFI	DATE INITIATED	DESCRIPTION	STATUS
		None	

2b. Concurrence Letters Approved since Last Meeting/Pending Approval

CL No.	DATE INITIATED	DESCRIPTION	STATUS
		None	

2c. Proposed Changes Approved since Last Meeting/Pending Approval

PC No.	DATE INITIATED	DESCRIPTION	STATUS
PC-01	06/07/06	VR-01 Abandonment of 6 Monitoring Wells	Variance Request Approved, PC Pending Approval

3. SCHEDULE AND STATUS OF WORK:
3a. Work accomplished since last meeting

DEFINABLE FEATURE	ACTIVITY	PREPARATORY PHASE DATE	INITIAL PHASE DATE	FOLLOW-UP STATUS	ACTIVITY SCHEDULED COMPLETION
02	Site Setup	05/31/06	05/31/06	All site setup has been completed including construction of Material Storage and Decon Pads	06/07/06
04	Installation of Erosion and Sediment Control	05/31/06	06/01/06	All E&S features have been installed and inspected by WMA	06/07/06
05	Field Sampling and Offsite Analysis	06/09/06	06/12/06	Performed waste characterization sampling of excavated soils and confirmation sampling of all excavation areas. Results back for Areas B and C, awaiting results for A and guidance for Excavation Area C	06/23/06
06	Contaminated Materials Excavation and Handling	06/07/06	06/07/06	All areas have been excavated and materials have been stockpiled inside material storage	06/20/06

				pad. Waiting for approval to extend excavation of Area C	
DEFINABLE FEATURE	**ACTIVITY**	**PREPARATORY PHASE DATE**	**INITIAL PHASE DATE**	**FOLLOW-UP STATUS**	**ACTIVITY SCHEDULED COMPLETION**
08	Site Restoration	06/19/06	06/19/06	Began backfilling of Area B, waiting on topsoil approval to complete backfill of B. Waiting for confirmation sampling results for other areas before backfill begins	07/06/06

3b. Work to be accomplished before the next QC Meeting (includes both on-site and off-site work and testing).

SCHEDULED PREPARATORY PHASES PRIOR TO NEXT MEETING	SCHEDULED DATE
Transportation and Disposal of Soils	06/23/06

4. REWORK STATUS

4a. Rework items identified and pending correction

DATE IDENTIFIED	DESCRIPTION OF REWORK REQUIRED	ESTIMATED COMPLETION DATE
	None	

4b. Rework items completed since last meeting

DATE IDENTIFIED	DESCRIPTION OF REWORK REQUIRED	DATE COMPLETED
	None	

5. STATUS OF SUBMITTALS:

5a. Submittals reviewed and approved since last meeting

SPEC. SECTION	TRANSMITTAL # AND SUBMITTAL DESCRIPTION	DATE APPROVED
Work Plan Section 3.5	Submittal 001 – Backfill Chemical Analysis and Backfill Geotechnical Analysis	06/14/06 (signed)

5b. Submittals pending approval

SPEC. SECTION	TRANSMITTAL # AND SUBMITTAL DESCRIPTION	DATE SUBMITTED	DATE APPROVAL REQUIRED	REQUIRED BY GVMT OR CONTR
	None			

5c.Submittals required in the near future

SPEC. SECTION	SUBMITTAL DESCRIPTION	ANTICIPATED DATE TO BE SUBMITTED	ESTIMATED DATE REQUIRED	GVMT OR CONTR APPROVAL
Work Plan	Waste Characterization Analysis	06/22/06	06/26/06	GVMT
Work Plan	Topsoil Chemical Analysis	06/21/06	06/27/06	GVMT
Work Plan	Facility Permit	06/22/06	06/26/06	CONTR
Work Plan	Shipping Waste Manifests	06/30/06	06/30/06	CONTR
Work Plan	Backfill Density Testing	07/05/06	07/06/06	CONTR

6. TESTING:

6a. Testing performed since last meeting

SPEC. SECTION	DESCRIPTION OF TEST	DATE COMPLETED
Work Plan Section 3.5	Completed Waste Characterization sampling, topsoil sampling, and confirmation sampling of excavated areas	06/19/06
Work Plan Section 3.8.1	Troxler Nuclear Density Testing of Backfilled areas	Ongoing

6b. Testing scheduled prior to next meeting

SPEC. SECTION	DESCRIPTION OF TEST	SCHEDULED DATE
Work Plan Section 3.8.1	Continue Troxler Density Testing of Backfilled Areas	Ongoing

6c.Testing results pending/received since last meeting

SPEC. SECTION	DESCRIPTION OF TEST	STATUS
Work Plan Section 3.5	Confirmation Results from Excavation Areas B and C	Area B results = below PRG; Area C results = Arsenic concentrations above PRG

7. DOCUMENTATION:

Documentation required prior to next meeting

DOCUMENTATION DESCRIPTION	DATE REQUIRED
Daily Reports	Daily
QC Meeting Minutes	06/23/06
Updated Testing Plan and Log	06/23/06

8. STATUS OF AS-BUILTS: (Define changes made since last meeting and provide an explanation for as-built drawings that are not up-to-date).

Pending the results of confirmation samples, excavation areas will be surveyed and drawing will be updated.

9. QC AND PRODUCTION ISSUES DISCUSSED AND RELATED RESOLUTIONS:

Total Days of Weather Delay to Date	Days of Weather Delay this Period
2	2

Total Days of UXO Delay to Date	Days of UXO Delay this Period
0.0	0.0

10. OTHER ITEMS DISCUSSED:

None

11. ACTION ITEMS:

(Include items that may require revising the QC plan or changes in procedure)

1. Awaiting Navy Contract approval prior to conducting additional excavation of Area C (FSSI 25).
    a. Area C excavation performed.
2. Weather and UXO delays MOD being submitted this week (FSSI 11).
    a. Being prepared and will be submitted this week (S. Carriere)
3. Contacts for Transportation and Disposal in Shawn Jorgensen's absence.
    a. Shawn will put an email together with contacts and requirements for T&D.
4. Pre-Final meeting
    a. Pre-Final walkthrough scheduled for June 29, 2006 at 1300 hours.

12. DATE OF NEXT SCHEDULED QC MEETING:

Next scheduled meeting will be the Pre-Final walkthrough to be conducted Thursday June 29, 2006 at 1300 hours.

SECTION 4.0
DAILY CONTRACTOR QC/PRODUCTION REPORTS

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 01
Date 5/30/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐
	MATERIALS STORED PROPERLY.	☐	☐
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐
	WORKMANSHIP IS SATISFACTORY	☐	☐
	TEST RESULTS ARE ACCEPTABLE.	☐	☐
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐

IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT

Definable feature/s of work

01 Mobilization of Personel and Equipment
Personnel mobed to site and began relocating equipment to Site 57.

02 Site Setup
Subcontractor (Dave Roberts with Your Locator, Inc.) on site to locate utilities.

Definable feature/s of work	TESTING PERFORMED & WHO PERFORMED TEST
None	None

Definable feature/s of work	TESTING PERFORMED & WHO PERFORMED TEST
None	None

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Start of project. Crew mobing in throughout the day.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 0.0

See attached Contractor Production Report No. 01

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Forshey Jr. 5/30/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 05/30/06 Tue

REPORT NO. 01 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear and Hot

MIN TEMP: 76

MAX TEMP: 92

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	4	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	7	6	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	5	3.5	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0	8	SHAW E&I
Supervises all tasks on site, assist Utility Locator	C. HERNANDEZ	SITE 57	Site Supervisor	5	6*	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	5	3.5	SHAW E&I
Review shop drawings	T. COLLINS	SITE 57	TECH	5	2	SHAW E&I
Review shop drawings	S. SMITH	SITE 57	LEAD OP.	6	6	FSSI
Off Site	E. ABNEY	Off Site	TECH	0	12	SHAW E&I
Review shop drawings	T. HURLEY	SITE 57	TECH	4	5	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					52	
TOTAL PROJECT TRAVEL HRS					**52**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	41.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	0
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	41

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT\MATERIALS RECEIVED TODAY

SHAW EQUIP	WASTE MANAGEMENT	FSSI	Allied Rentals
1 - 320 Excavator	1 - 6yd Dumpster	1 - Pickup truck	1 - Connex box

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
	1 - 320 Excavator				1 - Pickup truck	
				WASTE MANAGEMENT	BURCH OIL	
				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
						1 - Connex box

REMARKS

Mobe personnel to site, and review shop drawings

Utility Locator - Dave Roberts 540-842-7926 went to Site 57 and marked the utilitys in and around the excavation area.

Performed tool inventory at con-nex box

Reviewed material take off list with Kent - PBA

Picked up supplies

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 5/31/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 02
Date 5/31/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☑	☐
	THE SUBMITTALS HAVE BEEN APPROVED.	☑	☑
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☑	☐
	MATERIALS STORED PROPERLY.	☑	☐
	PRELIMINARY WORK WAS DONE CORRECTLY.	☑	☐
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐
	WORK METHOD AND SCHEDULE DISCUSSED.	☑	☐
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☑	☐
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐
	WORKMANSHIP IS SATISFACTORY	☑	☐
	TEST RESULTS ARE ACCEPTABLE.	☐	☐
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐

IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT

PREPARATORY — Definable feature/s of work

01 Mobilization of Personel and Equipment*
Personel mobed to site and continued relocating equipment to Site 57.

02 Site Setup*
Prepared for Photo documentation of site (couldn't get camera pass). Notified Miss Utilities of Maryland of the work activities for locates. Reviewed drawings and discussed Decon Pad and materials storage pad.

03 Utility Relocation*
Relocated mesh fence, small trailer, and pipe stands.

04 Erosion and Sediment Control*
Located and inventoried materials for E&S (Silt fence, sand bags, etc)

*Preparaty Conducted for Definable feature of work, see Attached Preparatory Phase Checklist No. 02

INITIAL — Definable feature/s of work

02 Site Setup
Performed photo documentation of site with Jim Desmond as escort. Reviewed photos from pre construction visit.

03 Utility Relocation
Mesh fence, pipe stand, and small trailer have been relocated. The Smoking Gazebo will not be moved until Friday.

TESTING PERFORMED & WHO PERFORMED TEST: None

FOLLOW-UP — Definable feature/s of work

None

TESTING PERFORMED & WHO PERFORMED TEST: None

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS): None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST): None

REMARKS:
See the attached Preparatory Phase Checklist and Meeting Minutes for items reviewed during Preparatory Meeting.
See attached Safety Work Permit
See attached Contractor Production Report No. 02

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 0.0

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Forshey, Jr. 5/31/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

PREPARATORY PHASE CHECKLIST

(CONTINUED ON SECOND PAGE)

SPEC SECTION	DATE
Final Work Plan – Section 3.1 – 3.4	05/31/06

CONTRACT NO	DEFINABLE FEATURE OF WORK	SCHEDULE ACT NO.	INDEX #
N62470-03-D-4402	Mobilization / Site Setup / Utility Relocation / Erosion and Sediment Control	01002000 / 01004000 / 03001000 / 05007000	02

PERSONNEL PRESENT

GOVERNMENT REP NOTIFIED __48_ HOURS IN ADVANCE: * Notified 24 hours in advance YES ☐ NO ☒

NAME	POSITION	COMPANY/GOVERNMENT
Jim Desmond	ROICC Inspector	Navy
Steve Carriere	Project Manager	Shaw
Bill Simpson	Site Superintendent	FSSI
Adam Forshey	QC Manager / Engineer	Shaw
Cano Hernandez	Operations Supervisor	Shaw
Kent Phillips	PBA	Shaw
Crew – See Contractor Production Report		FSSI / Shaw

SUBMITTALS

REVIEW SUBMITTALS AND/OR SUBMITTAL REGISTER. HAVE ALL SUBMITTALS BEEN APPROVED? Not applicable YES ☐ NO ☐

IF NO, WHAT ITEMS HAVE NOT BEEN SUBMITTED? Information is available on silt fence, geotextile fabric, 10 mil and 20 mil Poly, sand, berm soils, and stone, but is not required as a submittal.

ARE ALL MATERIALS ON HAND? YES ☐ NO ☒

IF NO, WHAT ITEMS ARE MISSING? 4 more rolls of high visibility fence are on order. Geotextile fabric also on order and straw bales (to be delivered Tomorrow).

CHECK APPROVED SUBMITTALS AGAINST DELIVERED MATERIAL. (THIS SHOULD BE DONE AS MATERIAL ARRIVES.)

COMMENTS:

MATERIAL STORAGE

ARE MATERIALS STORED PROPERLY? YES ☒ NO ☐

IF NO, WHAT ACTION IS TAKEN?

SPECIFICATIONS

REVIEW EACH PARAGRAPH OF SPECIFICATIONS. Reviewed the applicable paragraphs of the work plan for Site 57.

DISCUSS PROCEDURE FOR ACCOMPLISHING THE WORK. Mobilization and Site Setup includes Site Layout and Photographic Documentation, Utility Search, Decontamination Pad Construction, and Materials Storage Pad Construction. Utility Relocation includes the relocation of the smoking gazebo to the Southeast of its current location. Erosion and Sediment Control includes the installation of silt fence and straw bales, a stabilized construction entrance, And diversion berms as shown in Figure 3-1.

CLARIFY ANY DIFFERENCES.

PRELIMINARY WORK & PERMITS

ENSURE PRELIMINARY WORK IS CORRECT AND PERMITS ARE ON FILE.

IF NOT, WHAT ACTION IS TAKEN?

Base Safety Permit - done

Signed Stormwater Management Waiver – done (Appendix B, Attachment 1 of Work Plan)

Camera Pass for Photographic Documentation – in progress (Personnel for pass on vacation will try again tomorrow)

Utility Location markings prior to any intrusive activities – in progress (Miss Utilities will complete by Friday)

TESTING

IDENTIFY TEST TO BE PERFORMED, FREQUENCY, AND BY WHOM. Not applicable.

WHEN REQUIRED?

WHERE REQUIRED?

REVIEW TESTING PLAN.

HAS TEST FACILITIES BEEN APPROVED?

SAFETY

ACTIVITY HAZARD ANALYSIS APPROVED? YES ☒ NO ☐

REVIEW APPLICABLE PORTION OF EM 385-1-1. Steve Carriere reviewed all applicable AHA's for the Preparatory activities. Site Orientation and base safety rules Reviewed by Bill Simpson.

MEETING COMMENTS

NAVY/ROICC COMMENTS DURING MEETING.
Jim Desmond present but had no comments.

OTHER ITEMS OR REMARKS

OTHER ITEMS OR REMARKS:
None

Adam J. Forshey Jr. 5/31/06
QC MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 05/31/06 Wed.

REPORT NO. 02 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear and Hot

MIN TEMP: 76 | MAX TEMP: 92

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site, assist Utility Locator	C. HERNANDEZ	SITE 57	Site Supervisor	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Review shop drawings	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Review shop drawings	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Off Site	E. ABNEY	Off Site	TECH	10	0	SHAW E&I
Review shop drawings	T. HURLEY	SITE 57	TECH	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					52	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	100.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	41
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	141

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

SHAW EQUIP	WASTE MANAGEMENT	FSSI	Allied Rentals		Sunbelt
1 - 320 Excavator	1 - 6yd Dumpster	1 - Pickup truck	1 - Connex box	2- Rolls of silt fence	Ride on trencher

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
	1 - 320 Excavator				1 - Pickup truck	
				WASTE MANAGEMENT	BURCH OIL	
				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
						1 - Connex box

REMARKS

Received Safety Work Permit from the Navy.
Receive trencher for silt fence installation
Move excavator to site 57
Relocate small building at site 57
Relocate sand bags to site 57
Relocate pipe rack to west side of parking lot at site 57
Sweep down parking lot
Receive E&S item

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 5/31/2006

GOVERNMENT INSPECTOR DATE

DATE: 5/31/06
BLDG/AREA 160

POST PERMIT ON WORKSITE
SAFETY WORK PERMIT FOR EXPLOSIVE AREA
INDIAN HEAD DIVISION, NAVAL SURFACE WARFARE CENTER

EXPIRES: 9/31/06

WORK PERFORMED BY: ACTIVITY FORCES-CODE ( )/ CONTRACTOR-NAME: Field Service Support INC. ADHERE TO SPECS OF CONTRACT # 03-D-4402

YES ☐ NO ☑ RE-INSPECTION OF AREA BY SAFETY INSPECTOR REQUIRED PRIOR TO BEGINNING WORK CODE/INITIAL/DATE

DESCRIPTION OF WORK AUTHORIZED: Authorized to remove contaminated soil (Tetra Chloro Ethelene) T.C.E. and to replace it with clean soil as per contract specifications and agreements. (Site 57)

1. DECONTAMINATION OF AREA REQUIRED AS FOLLOWS:

YES	NO	PRIOR TO START CLEAR WORK THROUGH BLDG/AREA SUPERVISOR DAILY
☐	☑	A. REMOVE ALL EXPLOSIVES FROM (SPECIFY)
☑	☐	B. REMOVE HAZARDOUS MATERIALS (SPECIFY) Done
☐	☑	C. WASH AREA DOWN (SPECIFY)
☐	☑	D. TREAT WITH DESENSITIZING AGENT (SPECIFY)
☑	☐	E. SECURE EXPLOSIVE OPERATIONS IN Bldg. 292 if
☐	☐	F. OTHER (SPECIFY) Contract effort will be within explosive arcs.

2. OPEN FLAME (HOT) OR SPARK-PRODUCING WORK (WELDING, TORCH, SOLDERING, GRINDING, ETC.) AUTHORIZED ____ NOT AUTHORIZED ____

YES	NO	
☐	☑	A. HAVE FIRE EXTING. ON-SITE DURING HOT WORK (TYPE:)
☐	☑	B. HAVE FIRE WATCH ON-SITE DURING HOT WORK
☐	☑	C. STAY ON-SITE 30 MINUTES AFTER HOT WORK IS COMPLETE
☐	☑	D. REMOVE FLAMM./COMBUST. MATERIAL FROM HOT-WORK SITE
☐	☑	E. BUFFER BAY(S) REQUIRED (SPECIFY)
☐	☑	F. HOT WORK AREA TO REMAIN WET DURING WORK
☐	☑	G. OTHER (SPECIFY)

3. EQUIPMENT AUTHORIZED FOR USE

YES	NO	
☐	☑	A. TORCH/WELDER
☑	☐	B. POWER TOOLS (GRINDER, DRILL, SKILSAW, BACKHOE, GENERATOR, AIR COMPRESSOR)/POWER EQUIPMENT (SPECIFY) Excavator Front End Loader
☑	☐	C. HAND TOOLS
☐	☑	D. NON-SPARKING TOOLS
☐	☑	E. OTHER (SPECIFY)

4. PERSONAL PROTECTIVE EQUIPMENT REQUIRED

YES	NO	
☐	☐	EYE PROTECTION (SAFETY GLASSES, GOGGLES, FACE SHIELD)
☐	☐	HEARING PROTECTION
☐	☐	POWDER UNIFORM (COVERALLS & CAP)
☐	☐	CONDUCTIVE SHOES OR NO-STATS
☐	☐	RESPIRATORY PROTECTION (SPECIFY)
☐	☐	HAND/FOOT/HEAD PROTECTION (SPECIFY)
☐	☐	FALL PROTECTION REQUIRED (SPECIFY)
☐	☐	OTHER (SPECIFY)

As per Safety Plan

5. ADDITIONAL REQUIREMENTS

YES	NO	
☑	☐	NOTIFY BLDG/AREA SUPERVISOR WHEN WORK IS COMPLETE
☐	☑	EXPLOSIVES TRANSFERS ALLOWED IN AREA DURING WORK
☑	☐	NOTIFY FIRE DEPT / PUBLIC WORKS UTILITIES OF WORK
☑	☐	LOCKOUT/TAGOUT HAZARDOUS ENERGY SOURCES (SPECIFY)
☐	☑	RE-INSP OF AREA REQ'D BY SAFETY INSP UPON COMPLETION OF WORK
☐	☑	OTHER (SPECIFY)

6. OTHER: Provision of EM-385-1-1 Army Corp of Engineer must be strictly adhered to. Relocation of Smoke Gazebo # TS-17 is authorized and the gazebo will be put back at original location

Deborah C Clark — SUPERVISOR IN IMMEDIATE AREA/DATE

R Gruel 5/31/06 — SAFETY DEPARTMENT OFFICIAL/DATE

CONTRACT REPRESENTATIVE/DATE

PUBLIC WORKS REPRESENTATIVE/DATE

NDW-IHDIVNAVSURFWARCEN-5100/3 (Rev. 8-98)

This permit is issued for the protection of all workers and equipment. No deviation from requirements of this permit is authorized without permission of the issuing agent. If method of work, or conditions of immediate area change, or other hazardous conditions arise during work, work will be stopped immediately and the Safety Department and/or the Fire Department will be notified. Notify the Safety Department when job is completed. All permits issued are good ONLY for the day issued and new permits will be issued daily if work is to continue over a period of time unless otherwise stated.

DO ALL WORK THE SAFE WAY

Preparatory Meeting Minutes
May 31, 2006 - 0700
Site 57 – Indian Head, MD

- Introduction and Tailgate Safety Meeting (Bill Simpson, Cano Hernandez, & Steve Carriere)
    - Buddy System
    - Vehicle Inspections
    - Vehicle Passes
    - Location of Fire Pull Box Stations
    - Traffic Control at Area C

- Preparatory Meeting (review of key paragraphs from workplan) (Adam Forshey)
    - Mobilization and Site Setup
        - Review of Site Drawing (Fig 3-1)
        - Installation of High Visibility Fence around our three excavation areas.
        - Preconstruction site surveying and photo documentation.
        - Setting up the Decon Station, Materials Storage Pad, and Portable Scales for the Transportation and Disposal of Materials.
            - Review of Decon Pad and Materials Storage Pad Drawings
            - Keep Materials Storage Pad covered with Visqueen and secured with sandbags when not in use to prevent cross contamination
        - Subcontractor has located utilities within the excavation area and Miss Utilities has been contacted.
            - Can't perform any ground disturbing activities until utilities are complete
    - Utility Relocation
        - Smoking Gazebo will be temporarily relocated to the Southeast section of the asphalt lot (outside the limits of disturbance).
        - Temporary power will be connected to the gazebo.
        - Pipestand, small trailer structure, and mesh fence will be relocated before construction.
    - Erosion and Sediment Control
        - Silt Fence and Straw Bales
            - Used on the down-slope sides of the excavation areas, access roads, and the stabilized construction entrance
        - Sand Bags and Earth Dikes

            - Will serve as diversion berms. To be placed on the upstream side of the excavations to divert stormwater runoff.
        - Review and Discussion of Fig 3-1
        - Stabilized Construction Entrance (Fig 2-5)
            - Used to provide access to excavation Area B.
            - Layer of geotextile fabric with 6" of 2-3" stone on top.
    - Cano or myself will inventory and check materials today
    - Be aware of your surroundings (Overhead lines, wells, debris, etc.)

- Discussion of camera pass with Jim Desmond

- Review of applicable AHA (Steve Carriere)

- Site Orientation and Base Safety Rules review (Bill Simpson)

Shaw™ Shaw E & I, Inc.

By _____ Date 5/31/06 Subject PREP. SIGN IN SHEET Sheet No. _____ of _____

Chkd. By _____ Date _____ Proj. No. _____

.25 in. X .25 in.

NAME	SIGNATURE	COMPANY / GOV.
ADAM FORSHEY	Adam Forshey	SHAW
Ed Abney	Ed Abney	SHAW
STEVE SMITH	Steve Smith	FSSI
Tom Mosley	[illegible]	SHAW
Bill Simpson	Bill Simpson	FSSI
Jim Desnard	Jim Desnard	NAVY
Steve Carriere	[illegible]	Shaw
Cano Hernandez	Cano Hernandez	SHAW
Kent Phillips	Kent Phillips	Shaw
Jim WRIGHT	[illegible]	SHAW

108A-6-02

ACTIVITY HAZARD ANALYSIS FOR MOBILIZATION/ DEMOBILIZATION AND SITE SET-UP				
Task Breakdown	**Potential Hazards**	**Critical Safety Practices**	**Personal Protective Clothing and Equipment**	**Monitoring Devices**
Mobilization/ Demobilization and Site Set-up	Slips, Trips, Falls	• Clear walkways, work areas of equipment, tools, vegetation and debris • Exit equipment slowly and maintain three point contact • Mark, identify, or barricade other obstructions		
	Spills	• Clean up spills before initiating maintenance • Review maintenance procedures for safety practices		
	Struck By/ Against Heavy Equipment	• Wear reflective warning vests when exposed to vehicular traffic • Isolate equipment swing areas • Make eye contact with operators before approaching equipment • Understand and review hand signals • Follow hand signals of ground workers for equipment manipulation when placing/loading equipment into bucket. • Step away from equipment when bucket adjustments are made	Warning vests, hard hat, safety glasses and steel toe work boots	
	Pinch points	• Review equipment adjustment procedures, identify pinch points • Isolate/block pinch points to limit motion when inserting pins, fasteners, closing tackles	Leather gloves	
	Equipment failure	• Perform daily maintenance inspections on operating equipment		

ACTIVITY HAZARD ANALYSIS FOR MOBILIZATION/ DEMOBILIZATION AND SITE SET-UP				
Task Breakdown	**Potential Hazards**	**Critical Safety Practices**	**Personal Protective Clothing and Equipment**	**Monitoring Devices**
	Electrical Shock	• De-energize or shut off utility lines at their source before work begins • Use double insulated or properly grounded electric power-operated tools • Provide an equipment-grounding conductor program or employ ground-fault circuit interrupters • Use qualified electricians to hook up/disconnect electrical circuits • Inspect all extension cords daily for structural integrity, ground continuity, and damaged insulation • Cover or elevate electric wire or flexible cord passing through work areas to protect from damage • Keep all plugs and receptacles out of water • Use approved water-proof, weather-proof type if exposure to moisture is likely • Inspect all electrical power circuits prior to commencing work • Follow Shaw procedure HS315, Control of Hazardous Energy and the Site Specific Lockout/Tagout/Try Plan	Lockout/Tagout Devices	Voltage Meter or "Tic" Tracer
	Handling Heavy Objects	• Observe proper lifting techniques • Obey sensible lifting limits (60 lb. Maximum per person manual lifting) • Use mechanical lifting equipment (hand carts, trucks) to move large, awkward loads • Avoid carrying heavy objects above shoulder level • Avoid manual lifting/carrying tasks		

ACTIVITY HAZARD ANALYSIS FOR MOBILIZATION/ DEMOBILIZATION AND SITE SET-UP				
Task Breakdown	**Potential Hazards**	**Critical Safety Practices**	**Personal Protective Clothing and Equipment**	**Monitoring Devices**
	Sharp Objects	• Wear cut resistant work gloves when the possibility of lacerations or other injury may be caused by sharp edges or objects • Avoid razor knives. Use hooked cutters or shears whenever possible • Cut away from the body • Maintain all hand and power tools in a safe condition	Leather gloves	
	Ladders	• Inspect ladders before use for mud buildup on treads • Clean mud from boots before climbing on ladders • Follow the three point of contact rule • Review Shaw Health and Safety Procedure HS302-Ladders		
	High Noise Levels	• Use hearing protection when exposed to excessive noise levels (greater than 85 dBA over an 8-hour work period)	Hearing protection	
	Burns associated with loading/unloading equipment on trucks	• Identify heavy objects for loading that may have hot surfaces • Allow objects to cool or cover hot surfaces with non-combustible material to protect workers from buns		
	Walking on machine tracks	• Avoid walking on machine tracks whenever possible; clean tracks for safe walking/working surfaces • Observe track surfaces when walking, move cautiously on uneven, slippery surfaces • Avoid sudden awkward motions (pulling/jerking fuel hoses)		
	High Ambient Temperature	• Provide fluids to prevent worker dehydration • Monitor for heat stress in accordance with Shaw Health and Safety Procedure HS400		Meteorological Equipment

ACTIVITY HAZARD ANALYSIS FOR MOBILIZATION/ DEMOBILIZATION AND SITE SET-UP				
Task Breakdown	**Potential Hazards**	**Critical Safety Practices**	**Personal Protective Clothing and Equipment**	**Monitoring Devices**
EQUIPMENT REQUIRED		**INSPECTION REQUIREMENTS**	**TRAINING REQUIREMENTS**	
• Forklifts/hand carts • Ladders • Hand tools		• Daily equipment inspections as per manufacturers requirements • Inspection of all emergency equipment (i.e.: first aid kits, fire extinguishers)	• Review AHA with all task personnel • Review Site Specific Health and Safety Plan. • Review operations/safety manuals for all equipment utilized	

ACTIVITY HAZARD ANALYSIS FOR INSTALLATION OF EROSION AND SEDIMENT CONTROL				
Task Breakdown	**Potential Hazards**	**Critical Safety Practices**	**Personal Protective Clothing and Equipment**	**Monitoring Devices**
Silt Fence, Hay Bale Installation	Slips, Trips, Falls	•• Clear walkways, work areas of equipment, tools and debris •• Mark, identify, or barricade other obstructions		
	Handling Heavy Objects	•• Observe proper lifting techniques •• Obey sensible lifting limits (60 lb. maximum per person manual lifting) •• Use mechanical lifting equipment (hand carts, trucks) to move large, awkward loads		
	Allergic Reaction	•• Identify and review poisonous plants with workers •• Provide workers proper skin protection to prevent skin allergic reaction from exposure to hay, contaminated soil, plants, or other skin irritants	Tyvek coveralls, duct tape bottom of coveralls to boots; latex gloves within cotton gloves, if needed	
	Struck-by Hand Tools, Flying Debris	•• Hold stakes in place with tongs, vice-pliers or other remote grasping tools •• Wear safety goggles when using sledge hammer, hatchet, maul or axe	Leather gloves, face shield and goggles	
	Sharp Objects	•• Wear cut resistant work gloves when the possibility of lacerations or other injury may be caused by sharp edges or objects •• Maintain all hand and power tools in a safe condition •• Keep guards in place during use	Leather gloves	
	High Noise Levels	•• Use hearing protection when exposed to excessive noise levels (greater than 85 dBA over an 8-hour work period) •• Assess noise level with sound level meter if possibility exists that level may exceed 85dBA TWA	Ear plugs	Sound Level Meter
	High/Low Ambient Temperature	•• Monitor for Heat/Cold stress in accordance with Shaw Health and Safety Procedures # HS400, HS401 •• Provide fluids to prevent worker dehydration •• Follow work/rest schedule in the SSHSP Table 4.2	Insulated Clothing (subject to ambient temperature)	Meteorological Equipment

ACTIVITY HAZARD ANALYSIS FOR INSTALLATION OF EROSION AND SEDIMENT CONTROL				
Task Breakdown	**Potential Hazards**	**Critical Safety Practices**	**Personal Protective Clothing and Equipment**	**Monitoring Devices**
EQUIPMENT REQUIRED		**INSPECTION REQUIREMENTS**	**TRAINING REQUIREMENTS**	
• Hay bales • Silt Fence • Miscellaneous hand tools, shovels • Emergency Equipment		• Daily equipment inspections as per manufacturers requirements • Inspection of all emergency equipment (i.e.: first aid kits, fire extinguishers)	• Review AHA with all task personnel • Review Site Specific Health and Safety Plan. • Review operations/safety manuals for all equipment utilized	

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 03
Date 6/1/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐	Definable feature/s of work 04 Erosion and Sediment Control Began installation of silt fence and high visiblility fence for E&S controls. Straw bales arrived on site.
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☑	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

TESTING PERFORMED & WHO PERFORMED TEST
None

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Relocation of Smoking Gazebo postponed until Monday due to a cancellation by the electrician.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 0.0

See attached Contractor Production Report No. 03

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Florshey, Jr. 06/01/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/01/06 Thurs.

REPORT NO. 03 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear and Hot

MIN TEMP: 69 | MAX TEMP: 91

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site, assist Utility Locator	C. HERNANDEZ	SITE 57	Site Supervisor	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Install E&S controls	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Install E&S controls	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Install E&S controls	E. ABNEY	Off Site	TECH	10	0	SHAW E&I
	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**52**	

JOB SAFETY					
JOB SAFETY MEETING HELD THIS DATE?	YES	TOTAL WORK HOURS ON THIS DATE	90.0		
ANY LOST TIME ACCIDENTS THIS DATE?	NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	141		
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO				
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	231		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

ACF Environmental
50- 60" Stakes oak
1 - Geotextile 12.5' x 100'
5 - Rolls Orange Safety Fence

Straw Bales

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
TRK PU 03 Chevy	1 - 320 Excavator	Trencher -off rent 6-1-06			1 - Pickup truck	
Total Survey Station						
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Install E&S controls

Receive straw bales for site 57

QC - Adam Forshey received photo pass for documentation at site 57

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/1/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 04
Date 6/2/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

TESTING PERFORMED & WHO PERFORMED TEST
None

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)	REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None	None

REMARKS:
No work was performed at Site 57 today due to personnel needs at Olsen Rd. Landfill to repair E&S damages caused by weather conditions.

Inches of rain recorded at site trailer: 0.1
Cumulative inches of rain for project: 0.1
* Overnight Rain

See attached Contractor Production Report No. 04

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Florshey, Jr. 06/02/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/02/06 Fri.

REPORT NO. 04 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Thunder storms in the pm

MIN TEMP: 65 | MAX TEMP: 78

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	5	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	0	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Install E&S controls	T. COLLINS	SITE 57	TECH	0	0	SHAW E&I
Install E&S controls	S. SMITH	SITE 57	LEAD OP.	0	0	FSSI
Install E&S controls	E. ABNEY	SITE 57	TECH	0	0	SHAW E&I
	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Mobe to Site	H. STICKLE	SITE 57	EQ. OP.	0	3.5	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					3.5	
TOTAL PROJECT TRAVEL HRS					**55.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	25.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	231
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	256.0

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

Straw Bales

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
TRK PU 03 Chevy	1 - 320 Excavator	Trencher -off rent 6-1-06			1 - Pickup truck	
Total Survey Station						
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

No activities at site 57

Receive straw bales for site 57

Repair work at site 42 Olsen Rd.

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/2/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 05
Date 6/5/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐	Definable feature/s of work 04 Erosion and Sediment Control Continued installing erosion and sediment control. Earth berm along the north side of excavation Area A complete.
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☑	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 03 Utility Relocation Electrician on site and disconnected Smoking Gazebo. Gazebo has been relocated to the south-east side of the asphalt lot and electrical has been reconnected.
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

TESTING PERFORMED & WHO PERFORMED TEST
None

Inspected E&S conditions after rain event.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Approximatly .7" of rainfall occurred over the weekend.
6 Monitoring wells were abandoned by MDE. Please see the attached well logs.

Inches of rain recorded at site trailer: 0.7
Cumulative inches of rain for project: 0.8

See attached Contractor Production Report No. 05

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J Forsher, Jr 06/05/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/05/06 Mon.

REPORT NO. 05 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear

MIN TEMP: 58

MAX TEMP: 79

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Install E&S controls / relocate Gazebo	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Install E&S controls	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Install E&S controls / relocate Gazebo	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Install E&S controls / relocate Gazebo	H. STICKLE	SITE 57	EQ. OP.	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**55.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	100.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	256
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	356.0

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

United Rental

wheel loader w/ 5 cu yd bucket — 1-ld fill material

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06			1 - Pickup truck	
Total Survey Station						
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Continue with E&S controls

Build earthen berm and seed

Summit Services on site abandon six MW at site 57

Smith Elec. On site to disconnect and reconnect electricity to Gazebo

Relocate Gazebo

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez — DATE 6/5/2006

GOVERNMENT INSPECTOR — DATE

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

****

WATER WELL ABANDONMENT-SEALING REPORT FORM

****

SUBMIT COPIES OF COMPLETED FORM TO:

- ★ COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- ★ WELL OWNER
- ★ MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 06/05/06 (month/day/year)

★ PERMIT NUMBER OF ABANDONED WELL (if any) MW — 3 —

★ PERMIT NUMBER OF REPLACEMENT WELL N/A — —

★ PERSON ABANDONING WELL: B. Kimes

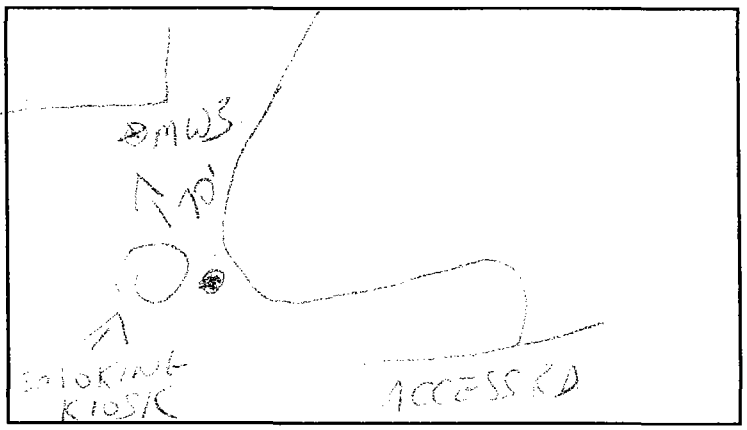
WELL DRILLERS LICENSE NUMBER: MD 081

CIRCLE: MWD/MSD/MGD

★ OWNER'S NAME: Tuckahoe WC

★ WELL LOCATION:
COUNTY: Charles Cty
NEAREST TOWN: Tuckahoe
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
NEAREST ROAD: _____

SITE LOCATION MAP



★ TYPE OF WELL BEING ABANDONED:

_____ DRILLED _____ JETTED
✓ BORED/AUGERED _____ HAND DUG
_____ OTHER (specify) _____

★ USE CODE:

_____ DOMESTIC _____ MUNICIPAL/PUBLIC
_____ IRRIGATION _____ INDUSTRIAL
✓ TEST/OBSERVATION _____ GEOTHERMAL

★ TYPE OF CASING:

_____ STEEL ✓ PLASTIC
_____ CONCRETE _____ OTHER (specify)
_____

★ SIZE OF CASING: 2 INCHES IN DIAMETER

★ DEPTH OF WELL: 14 FEET DEEP

★ WAS ANY CASING REMOVED? ____ YES ✓ NO
if yes, length removed, in feet: _____

★ WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
Bentonite	14	0'

VOLUME OF MATERIAL USED: 40 lbs

R. Williams — 336 — MWD/MSD/MGD — 06/05/06

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN — LICENSE # — CIRCLE ONE — DATE

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

****

WATER WELL ABANDONMENT-SEALING REPORT FORM

****

SUBMIT COPIES OF COMPLETED FORM TO:

- ★ COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- ★ WELL OWNER
- ★ MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 06/05/06 (month/day/year)

★ PERMIT NUMBER OF ABANDONED WELL (if any) MW — 41 —

★ PERMIT NUMBER OF REPLACEMENT WELL N/A — —

★ PERSON ABANDONING WELL: BILL KINGS

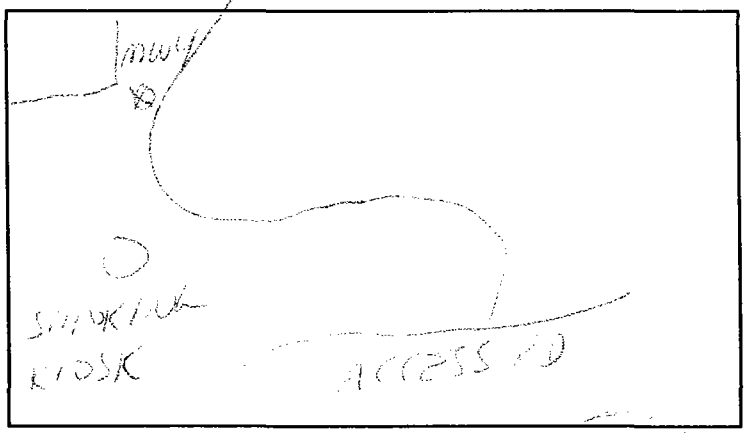
WELL DRILLERS LICENSE NUMBER: 081

CIRCLE: MWD/MSD/MGD

★ OWNER'S NAME: INDIAN HEAD BOSC

★ WELL LOCATION:
COUNTY: CHARLES
NEAREST TOWN: INDIAN HEAD
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
NEAREST ROAD: _____

SITE LOCATION MAP



★ TYPE OF WELL BEING ABANDONED:

_____ DRILLED _____ JETTED
✓ BORED/AUGERED _____ HAND DUG
_____ OTHER (specify) _____

★ USE CODE:

_____ DOMESTIC _____ MUNICIPAL/PUBLIC
_____ IRRIGATION _____ INDUSTRIAL
✓ TEST/OBSERVATION _____ GEOTHERMAL

★ TYPE OF CASING:

_____ STEEL ✓ PLASTIC
_____ CONCRETE _____ OTHER (specify) _____

★ SIZE OF CASING: 2 INCHES IN DIAMETER

★ DEPTH OF WELL: 15 FEET DEEP

★ WAS ANY CASING REMOVED? ____ YES ✓ NO
if yes, length removed, in feet: _____

★ WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
Bentonite	15	0

VOLUME OF MATERIAL USED: 10 lbs

R. Kings — 081 — MWD/MSD/MGD — 06/05/06

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN — LICENSE # — CIRCLE ONE — DATE

DENV 828 JULY 1997 3) WELL OWNER

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

****

WATER WELL ABANDONMENT-SEALING REPORT FORM

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SUBMIT COPIES OF COMPLETED FORM TO:

- ★ COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- ★ WELL OWNER
- ★ MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 06/05/06 (month/day/year)

★ PERMIT NUMBER OF ABANDONED WELL (if any) MW - 5 -

★ PERMIT NUMBER OF REPLACEMENT WELL N/A - -

★ PERSON ABANDONING WELL: Bill Kimes

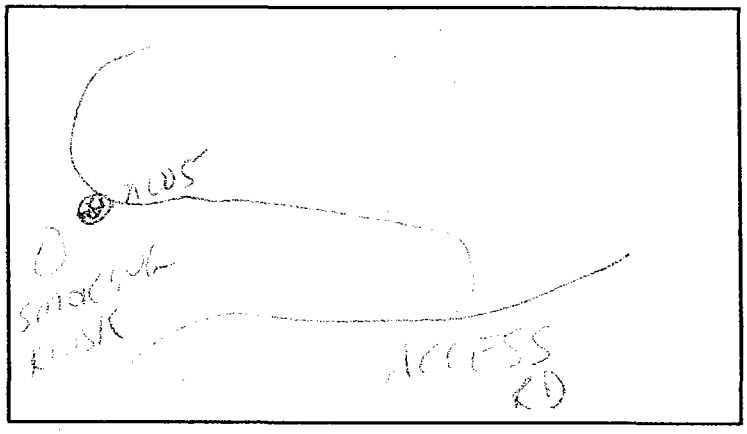
WELL DRILLERS LICENSE NUMBER: 081

CIRCLE: MWD/MSD/MGD

★ OWNER'S NAME: Indian Head NSWC

★ WELL LOCATION:
COUNTY: CHARLES
NEAREST TOWN: Indian Head
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
NEAREST ROAD: _____

SITE LOCATION MAP



★ TYPE OF WELL BEING ABANDONED:

_____ DRILLED _____ JETTED
✓ BORED/AUGERED _____ HAND DUG
_____ OTHER (specify) _____

★ USE CODE:

_____ DOMESTIC _____ MUNICIPAL/PUBLIC
_____ IRRIGATION _____ INDUSTRIAL
✓ TEST/OBSERVATION _____ GEOTHERMAL

★ TYPE OF CASING:

_____ STEEL ✓ PLASTIC
_____ CONCRETE _____ OTHER (specify) _____

★ SIZE OF CASING: 2 INCHES IN DIAMETER

★ DEPTH OF WELL: 16 FEET DEEP

★ WAS ANY CASING REMOVED? ____ YES ✓ NO
if yes, length removed, in feet: _____

★ WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
BENTONITE	16	0'

VOLUME OF MATERIAL USED: 40 lbs

Bill Kimes 081 MWD/MSD/MGD 06/05/06

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE # CIRCLE ONE DATE

DENV 828 JULY 1997 3) WELL OWNER

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

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WATER WELL ABANDONMENT-SEALING REPORT FORM

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SUBMIT COPIES OF COMPLETED FORM TO:

- ★ COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- ★ WELL OWNER
- ★ MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 06/05/06 (month/day/year)

★ PERMIT NUMBER OF ABANDONED WELL (if any) MW — 6 —

★ PERMIT NUMBER OF REPLACEMENT WELL N/A — —

★ PERSON ABANDONING WELL: B. Hilkins

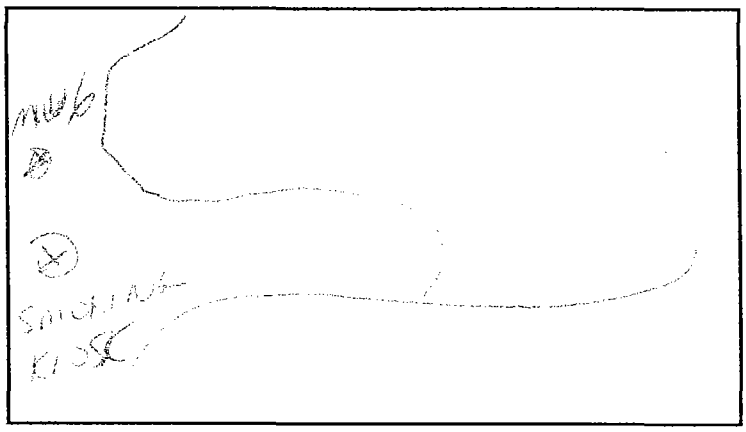
WELL DRILLERS LICENSE NUMBER: 081

CIRCLE: MWD/MSD/MGD

★ OWNER'S NAME: Indian Head MSDC

★ WELL LOCATION:
COUNTY: Charles Cty
NEAREST TOWN: Indian Head
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
NEAREST ROAD: _____

SITE LOCATION MAP



★ TYPE OF WELL BEING ABANDONED:

_____ DRILLED _____ JETTED
✓ BORED/AUGERED _____ HAND DUG
_____ OTHER (specify) _____

★ USE CODE:

_____ DOMESTIC _____ MUNICIPAL/PUBLIC
_____ IRRIGATION _____ INDUSTRIAL
✓ TEST/OBSERVATION _____ GEOTHERMAL

★ TYPE OF CASING:

_____ STEEL ✓ PLASTIC
_____ CONCRETE _____ OTHER (specify) _____

★ SIZE OF CASING: 2 INCHES IN DIAMETER

★ DEPTH OF WELL: 16 FEET DEEP

★ WAS ANY CASING REMOVED? ____ YES ✓ NO
if yes, length removed, in feet: _____

★ WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
BENTONITE	16'	0'

VOLUME OF MATERIAL USED: 70 lbs

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN	LICENSE #	MWD/MSD/MGD CIRCLE ONE	DATE
[illegible]	MD 081		06/05/06

DENV 828 JULY 1997 3) WELL OWNER

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

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WATER WELL ABANDONMENT-SEALING REPORT FORM

****

SUBMIT COPIES OF COMPLETED FORM TO:

- ★ COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- ★ WELL OWNER
- ★ MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 06/08/06 (month/day/year)

★ PERMIT NUMBER OF ABANDONED WELL (if any) MW — 7 —

★ PERMIT NUMBER OF REPLACEMENT WELL N/A — —

★ PERSON ABANDONING WELL: Baltimore

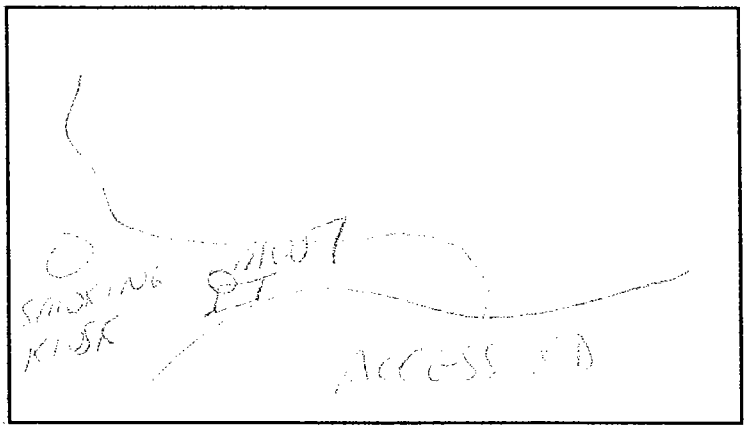
WELL DRILLERS LICENSE NUMBER: 001

CIRCLE: MWD/MSD/MGD

★ OWNER'S NAME: Thomas Industrial

★ WELL LOCATION:
COUNTY: Charles Co
NEAREST TOWN: Indian Head
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
NEAREST ROAD: _____

SITE LOCATION MAP



★ TYPE OF WELL BEING ABANDONED:

_____ DRILLED _____ JETTED
✓ BORED/AUGERED _____ HAND DUG
_____ OTHER (specify) _____

★ USE CODE:

_____ DOMESTIC _____ MUNICIPAL/PUBLIC
_____ IRRIGATION _____ INDUSTRIAL
✓ TEST/OBSERVATION _____ GEOTHERMAL

★ TYPE OF CASING:

_____ STEEL ✓ PLASTIC
_____ CONCRETE _____ OTHER (specify) _____

★ SIZE OF CASING: 2 INCHES IN DIAMETER

★ DEPTH OF WELL: 15' FEET DEEP

★ WAS ANY CASING REMOVED? ____ YES ✓ NO
if yes, length removed, in feet: _____

★ WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
Bentonite	15'	0'

VOLUME OF MATERIAL USED: 10 lbs

[signature] 340 MWD/MSD/MGD 06/08/06

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE # CIRCLE ONE DATE

DENV 828 JULY 1997 3) WELL OWNER

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

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WATER WELL ABANDONMENT-SEALING REPORT FORM

****

SUBMIT COPIES OF COMPLETED FORM TO:

- ★ COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- ★ WELL OWNER
- ★ MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 06/05/06 (month/day/year)

★ PERMIT NUMBER OF ABANDONED WELL (if any) MW — 8 —

★ PERMIT NUMBER OF REPLACEMENT WELL N/A — —

★ PERSON ABANDONING WELL: Bill Grimes

WELL DRILLERS LICENSE NUMBER: 081

CIRCLE: MWD/MSD/MGD

★ OWNER'S NAME: Independent Insulation

★ WELL LOCATION:
COUNTY: Charles
NEAREST TOWN: Indian Head
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
NEAREST ROAD: _____

SITE LOCATION MAP

★ TYPE OF WELL BEING ABANDONED:

_____ DRILLED _____ JETTED
✓ BORED/AUGERED _____ HAND DUG
✓ OTHER (specify) _____

★ USE CODE:

_____ DOMESTIC _____ MUNICIPAL/PUBLIC
_____ IRRIGATION _____ INDUSTRIAL
✓ TEST/OBSERVATION _____ GEOTHERMAL

★ TYPE OF CASING:

_____ STEEL ✓ PLASTIC
_____ CONCRETE _____ OTHER (specify) _____

★ SIZE OF CASING: 2 INCHES IN DIAMETER

★ DEPTH OF WELL: 15 FEET DEEP

★ WAS ANY CASING REMOVED? ____ YES ✓ NO
if yes, length removed, in feet: _____

★ WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
Bentonite	15'	0'

VOLUME OF MATERIAL USED: 10 lbs

Bill Grimes — 081 — MWD/MSD/MGD — 06/05/06
SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN — LICENSE # — CIRCLE ONE — DATE

DENV 828 JULY 1997 3) WELL OWNER

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 06
Date 6/6/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐	Definable feature/s of work
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	04 Erosion and Sediment Control Installed construction access entrance to Area B with geotextile and stone. Began placing sandbags at Area A. Seeded soil berm for stability. 03 Site Setup Stretched out liner for Material Storage Pad. Put geotextile fabric inside for added protection from damage. Installed 3 sides of the pad berm. Performed sawcutting of asphalt. Also double checked excavation limits.
	WORKMANSHIP IS SATISFACTORY	☑	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST: None

TESTING PERFORMED & WHO PERFORMED TEST: None

Performed daily inspection of E&S controls ; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Safety inspection performed by Navy today. No deficiences were found.
Notified WMA about inspecting E&S. E&S installation should be completed tomorrow

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 0.8

See attached Contractor Production Report No. 06

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Frosheg Jr. 06/06/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/06/06 Tue.

REPORT NO. 6 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear - No Rain

MIN TEMP: 61

MAX TEMP: 81

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Install E&S controls / saw cut asphalt	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Install E&S controls /Materaial Handling Pad	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Material Handling Pad Installation	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Material Handling Pad Installation	H. STICKLE	SITE 57	EQ. OP.	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**55.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	100.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	356
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	456.0

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT\MATERIALS RECEIVED TODAY

1 - ld rock / E&S Controls

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station						
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Adam Forshey and Cano Hernandez set up Total Station and double check Area A for limits of excavation
Installed 75% of the material storage pad and berm. (One side remains)
Saw cut asphalt for excavation.
Relocated Porta-John to site.
Received 1 load of dirt for berm.
Installed the constuction access pad (geotextile fabric and stone)
Completed installation of High vis. Fence.

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/6/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 07
Date 6/7/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☑	☐	Definable feature/s of work
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	06 Contaminated Material Excavation and Handling Preparatory Conducted for Definable feature of work, see Attached Preparatory Phase Checklist No. 07
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☑	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☑	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☑	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐	Definable feature/s of work
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	03 Site Setup Completed installation of Material Storage Pad and placed layer of sand along the bottom of pad. Started on the constuction of decon pad.
	WORKMANSHIP IS SATISFACTORY	☑	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST: None

TESTING PERFORMED & WHO PERFORMED TEST: None

Performed daily inspection of E&S controls ; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Spoke with WMA about inspecting E&S. E&S installation should be completed tomorrow morning.
Conducted Bi-Weekly QC meeting at 1300 hours.
See attached Contractor Production Report No. 07

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 0.8

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Florshey Jr. 06/07/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/07/06 Wednesday

REPORT NO. 7 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear - Sunny

MIN TEMP: 63 | MAX TEMP: 82

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Install E&S controls / saw cut asphalt	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Install E&S controls /Materaial Handling Pad	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Material Handling Pad Installation	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Material Handling Pad Installation	H. STICKLE	SITE 57	EQ. OP.	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**55.5**	

JOB SAFETY		
	JOB SAFETY MEETING HELD THIS DATE?	YES
	ANY LOST TIME ACCIDENTS THIS DATE?	NO
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?		NO
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?		NO
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	100.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	456
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	556.0

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

Farm Services Inc
21.75 ton Bank Sand

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station		Walk Behind Saw		1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Attended BI-Weekly meeting

Complete Installation of Material Handling Pad. Placed layer of sand inside pad

Start to install Decon Pad

United rental picked up one truck for maintenance

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/7/2006

GOVERNMENT INSPECTOR DATE

PREPARATORY PHASE CHECKLIST

(CONTINUED ON SECOND PAGE)

SPEC SECTION	DATE
Final Work Plan – Section 3.6	06/07/06

CONTRACT NO	DEFINABLE FEATURE OF WORK	SCHEDULE ACT NO.	INDEX #
N62470-03-D-4402	Contaminated Material Excavation and Handling	08001000	07

PERSONNEL PRESENT

GOVERNMENT REP NOTIFIED _48_ HOURS IN ADVANCE: *Notified 24 hours in advance YES ☐ NO ☒

NAME	POSITION	COMPANY/GOVERNMENT
Jim Desmond	ROICC Inspector	Navy
Steve Carriere	Project Manager	Shaw
Bill Simpson	Site Superintendent	FSSI
Adam Forshey	QC Manager / Engineer	Shaw
Cano Hernandez	Operations Supervisor	Shaw
Kent Phillips	PBA	Shaw
Jim Wright	SSO	Shaw
Crew – See Contractor Production Report		FSSI / Shaw

SUBMITTALS

REVIEW SUBMITTALS AND/OR SUBMITTAL REGISTER. HAVE ALL SUBMITTALS BEEN APPROVED? Not Applicable YES ☐ NO ☐

IF NO, WHAT ITEMS HAVE NOT BEEN SUBMITTED?

ARE ALL MATERIALS ON HAND? YES ☒ NO ☐

IF NO, WHAT ITEMS ARE MISSING?

CHECK APPROVED SUBMITTALS AGAINST DELIVERED MATERIAL. (THIS SHOULD BE DONE AS MATERIAL ARRIVES.)

COMMENTS:

MATERIAL STORAGE

ARE MATERIALS STORED PROPERLY? YES ☒ NO ☐

IF NO, WHAT ACTION IS TAKEN?

SPECIFICATIONS

REVIEW EACH PARAGRAPH OF SPECIFICATIONS. Reviewed the applicable paragraphs of the work plan for site 57.

DISCUSS PROCEDURE FOR ACCOMPLISHING THE WORK. Contaminated Material Excavating and Handling includes 3 areas (Area A, Area B, and Area C) to a depth of 8 feet below ground surface or water level, whichever comes first. Hand excavate around all utilities. Excavated material gets transferred into the loader bucket which transfers material to the storage pad. Excavator will have to reshape the pile throughout excavation and before covering pile.

CLARIFY ANY DIFFERENCES.

PRELIMINARY WORK & PERMITS

ENSURE PRELIMINARY WORK IS CORRECT AND PERMITS ARE ON FILE.

IF NOT, WHAT ACTION IS TAKEN?

WMA will be out to inspect E&S before digging (tomorrow AM)

TESTING	IDENTIFY TEST TO BE PERFORMED, FREQUENCY, AND BY WHOM. Not Applicable WHEN REQUIRED? WHERE REQUIRED? REVIEW TESTING PLAN. HAS TEST FACILITIES BEEN APPROVED?
SAFETY	ACTIVITY HAZARD ANALYSIS APPROVED? YES ☒ NO ☐ REVIEW APPLICABLE PORTION OF EM 385-1-1. Jim Wright reviewed the applicable AHA for this definable feature of work.
MEETING COMMENTS	NAVY/ROICC COMMENTS DURING MEETING. Jim Desmond present at meeting but had no comments.
OTHER ITEMS OR REMARKS	OTHER ITEMS OR REMARKS:

Adam Forshay Jr. 06/07/06

QC MANAGER DATE

Preparatory Meeting Minutes
June 7, 2006
Site 57 – Indian Head, MD

- Introduction and Tailgate Safety Meeting (Bill Simpson and Jim Wright)
  - Be aware of your surroundings
  - Use caution when moving equipment
  - Use proper PPE (Hard Had, Steel Toe, Gloves, Hearing Protection)

- Preparatory Meeting (review of key paragraph from work plan) (Adam Forshey)
  - Excavating Soils
    - Excavating in 3 areas (Area A, Area B, and Area C) to a depth of 8 ft. BGS or water level, whichever comes first.
      - Area A ~ 502 YDS
      - Area B ~ 67 YDS
      - Area C ~ 37 YDS
    - Lots of utilities and debris in the area. We will have to hand dig around all utilities.
    - Discussion of well abandonment. Cut wells at depth of excavation, remove the top, and backfill over remaining.
  - Handling Soils
    - Excavated material gets transferred into the loader bucket. Loader then moves soil from excavation area to Storage Pad.
    - Excavator will have to reshape the pile throughout the excavation and before covering the pile.
    - Do not overfill the loader bucket. Prevent any cross contamination of soils.

- After a representative sample is available, we will take Waste Characterization Samples and ship to an offsite lab.

- Confirmation Sampling will also be done once the area has been excavated.

- Discussion of well removal procedure
  - Review work plan procedure and discuss removal of concrete pad.

- Discussion of Fiber Optic Cables
  - Area has been located by a subcontractor (Dave Roberts) and has been cleared by Miss Utilities.

- Review of applicable AHA (Jim Wright)

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 08
Date 6/8/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐	Definable feature/s of work 06 Contaminated Material Excavation and Handling Excavated Area B to a maximum depth of 7'6" before encountering water. Uncovered 3 pipe lines Hand excavated around these utilities. We were told these lines are still charged. Covered Material Storage Pad at the end of the day.
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☑	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 02 Site Setup Completed installation of Decon Pad. All Site Setup activities are complete. 04 Erosion and Sediment Controls E&S inspected by WMA (Paula). Corrections required are addition of a piece of silt fence to the eastern side of the construction entrance back to asphalt, addition of silt fence along ditch at Area A once excavation is complete, and monitoring of sand bags at Area A for sediment buildup. Deficiences corrected or noted for future correction as recommended from WMA.
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST: None

TESTING PERFORMED & WHO PERFORMED TEST: None

Performed daily inspection of E&S controls ; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Paula from WMA on site to inspect E&S. Said digging can begin, correct minor E&S deficiencies.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 0.8

See attached Contractor Production Report No. 08

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Forshey, Jr. — QC MANAGER — DATE 06/08/06

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/08/06 Thursday

REPORT NO. 8 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear - No Rain

MIN TEMP: 62

MAX TEMP: 78

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Install Decon Pad / Excavation of Area B	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Install Decon Pad / Excavation of Area B	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Install Decon Pad / Excavation of Area B	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Install Decon Pad / Excavation of Area B	H. STICKLE	SITE 57	EQ. OP.	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**55.5**	

JOB SAFETY		
	JOB SAFETY MEETING HELD THIS DATE?	YES
	ANY LOST TIME ACCIDENTS THIS DATE?	NO
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?		NO
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?		NO
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	90.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	556
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	646.0

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

United Rental
4- Road Barricades

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station			6-Jul	1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Install Decon Pad
Excavate Area B to -7ft 6in. Uncovered 3 pipes, one a 6in iron pipe that was not marked by locator - No damage was done to any pipe,
Hand excavation and Probing was performed
Excavated material was placed in Matrial Handling Pad and covered for the night
Air monitoring was performed at Area B by H&S Jim Wright
A spotter was used to locate utilities
Grabbed Top Soil samples for Adam Forshey. Samples were taken and shipped off for analysis.
Covered AHA on Material Excavation and Handling
Excavation permitt was issued by H&S Jim Wright

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/8/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 09
Date 6/9/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☑	☐
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐
	MATERIALS STORED PROPERLY.	☑	☐
	PRELIMINARY WORK WAS DONE CORRECTLY.	☑	☐
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐
	WORK METHOD AND SCHEDULE DISCUSSED.	☑	☐
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☑	☐
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐
	WORKMANSHIP IS SATISFACTORY	☑	☐
	TEST RESULTS ARE ACCEPTABLE.	☐	☐
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐

IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT

PREPARATORY — Definable feature/s of work

05 Field Sampling and Offsite Analysis
Reviewed work plan and conducted preparatory meeting sampling of materials.
See attached Preparatory Checklist No 09. and Preparatory meeting minutes

INITIAL — Definable feature/s of work

06 Contaminated Material Excavation and Handling
Removed asphalt from NW corner of Area A.
Began excavation of Area A. Dug to a depth of 8' in NW asphalt area. Covered Material Storage Pad at the end of day.

TESTING PERFORMED & WHO PERFORMED TEST: None

FOLLOW-UP — Definable feature/s of work

None

TESTING PERFORMED & WHO PERFORMED TEST: None

Performed daily inspection of E&S controls ; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS): None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST): None

REMARKS:
See attached Preparatory Checklist No. 09.
See attached Preparatory Meeting Minutes.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 0.8

See attached Contractor Production Report No. 09

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Florsheim Jr. 06/09/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/09/06 Friday

REPORT NO. 9 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Sunny - No Rain

MIN TEMP: 61 | MAX TEMP: 79

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Excavation Area - A	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Excavation Area - A	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Excavation Area - A	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Excavation Area - A	H. STICKLE	SITE 57	EQ. OP.	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**55.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	90.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	646
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	736.0

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

United Rental	Farm Services	Burch Oil of Charles Co.
1-pickup Truck	1-ld Top Soil	458.0 gallons Fuel

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station			6-Jul	1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Relocated Fuel Cell from Olson Road to Site 57

Removed asphalt from Area - A

Hand excavation and Probing was performed in Area - A

Excavated material was placed in Matrial Handling Pad and covered for the night

Air monitoring was performed at Area - A by H&S Jim Wright

A spotter was used to locate utilities

Did not encounter line - must be at minus 8ft.

Covered HS- 308 Excavation at tailgate meeting

Excavation permitt was issued by H&S Jim Wright

Inspected Erosion and Sediment Controls

Housekeeping of work area

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/9/2006

GOVERNMENT INSPECTOR DATE

PREPARATORY PHASE CHECKLIST

(CONTINUED ON SECOND PAGE)

SPEC SECTION	DATE
Final Work Plan – Section 3.5	06/09/06

CONTRACT NO	DEFINABLE FEATURE OF WORK	SCHEDULE ACT NO.	INDEX #
N62470-03-D-4402	Field Sampling and Offsite Analysis	03004000	09

PERSONNEL PRESENT

GOVERNMENT REP NOTIFIED _48_ HOURS IN ADVANCE: * Notified 24 hours in advance YES ☐ NO ☒

NAME	POSITION	COMPANY/GOVERNMENT
Steve Carriere	Project Manager	Shaw
Bill Simpson	Site Superintendent	FSSI
Adam Forshey	QC Manager / Engineer	Shaw
Cano Hernandez	Operations Supervisor	Shaw
Crew – See Contractor Production Report		FSSI / Shaw

SUBMITTALS

REVIEW SUBMITTALS AND/OR SUBMITTAL REGISTER. HAVE ALL SUBMITTALS BEEN APPROVED? Not Applicable YES ☐ NO ☐

IF NO, WHAT ITEMS HAVE NOT BEEN SUBMITTED?

ARE ALL MATERIALS ON HAND? YES ☒ NO ☐

IF NO, WHAT ITEMS ARE MISSING? Sampling supplies (bottles and cooler) delivered today. Jim Wright getting bowls, spoons, and gloves.

CHECK APPROVED SUBMITTALS AGAINST DELIVERED MATERIAL. (THIS SHOULD BE DONE AS MATERIAL ARRIVES.)

COMMENTS:

MATERIAL STORAGE

ARE MATERIALS STORED PROPERLY? YES ☒ NO ☐

IF NO, WHAT ACTION IS TAKEN?

SPECIFICATIONS

REVIEW EACH PARAGRAPH OF SPECIFICATIONS. Reviewed the applicable paragraphs of the work plan for Site 57.

DISCUSS PROCEDURE FOR ACCOMPLISHING THE WORK. Field Sampling and Offsite Analysis – Reviewed procedure for Waste Characterization Sampling and Confirmation Sampling. Backfill analytical already complete and awaiting results on Topsoil. Discussed requirements for sampling liquids if necessary.

CLARIFY ANY DIFFERENCES. We will be taking the Confirmation Samples in Area B and Area C as directed by Tetra Tech's sampling protocol and submitting the material to their lab for analysis.

PRELIMINARY WORK & PERMITS

ENSURE PRELIMINARY WORK IS CORRECT AND PERMITS ARE ON FILE.

IF NOT, WHAT ACTION IS TAKEN?

TESTING

IDENTIFY TEST TO BE PERFORMED, FREQUENCY, AND BY WHOM. Waste Characterization sampling and Confirmation Sampling will be performed by Adam Forshey and Tim Collins as directed by the Work Plan and TetraTech's sampling procedures.

WHEN REQUIRED? Waste Characterization Sampling will be performed once a representative sample can be collected of all three areas. Confirmation Sampling will be done once the areas have been excavated.

WHERE REQUIRED?

REVIEW TESTING PLAN.

HAS TEST FACILITIES BEEN APPROVED? Samples are being shipped to an approved offsite facility for analysis.

SAFETY

ACTIVITY HAZARD ANALYSIS APPROVED? YES ☒ NO ☐

REVIEW APPLICABLE PORTION OF EM 385-1-1. AHA reviewed by Cano Hernandez.

MEETING COMMENTS

NAVY/ROICC COMMENTS DURING MEETING.

No Navy/ROICC personnel attended meeting

OTHER ITEMS OR REMARKS

OTHER ITEMS OR REMARKS:

None

Adam Forshey Jr. 06/09/06

QC MANAGER DATE

Preparatory Meeting Minutes
June 9, 2006
Site 57 – Indian Head, MD

- Introduction and Tailgate Safety Meeting (Bill Simpson, Cano Hernandez, and Jim Wright)
    - Heat Stress
    - Drink lots of fluids
    - Comments and review of Excavation of Area B
    - Review of HS308

- Preparatory Meeting (review of key paragraph from work plan) (Adam Forshey)
    - Field Sampling and Offsite Analysis
        - We are performing Waste Characterization Sampling of excavated soils and Confirmation Sampling to be submitted to TetraTech for analysis
        - Backfill Analytical already complete (from Site 42) – Same source
        - Awaiting analytical from lab for Topsoil
    - Waste Characterization Sampling
        - Will be taken from a representative sample of all three areas
        - Sample results will be used to prepare a waste profile for offsite disposal
    - Confirmation Sampling
        - Materials and protocol to arrive at trailer from TetraTech today
        - Sample from excavation Areas B and C to ensure contaminate levels are lower than Remediation Goals

- Sampling materials include protective disposable gloves, stainless steel bowls, and stainless steel spoons.

- If liquid waste is generated, we must take one sample per drum

- Sampling and Analysis plan is available if anyone would like to read it.

Preparatory Meeting Sign In Sheet
Field Sampling and Offsite Analysis
June 9, 2006 – 0700 Hours

Name	Signature	Date
ADAM FORESHEY	Adam Foreshey	06/09/06
Tim Collier	[illegible]	6/09/06
Ed Abney	[illegible]	6-9-06
Jim WRIGHT	[illegible]	6-9-06
Bill SIMPSON	[illegible]	6-9-06
HENRY STICKLER	[illegible]	6-9-06
Chad Hernandez	[illegible]	6-09-06

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 10
Date 6/12/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls (after rain event); See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)	REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None	None

REMARKS:
No work performed today due to rainy weather conditions.

Inches of rain recorded at site trailer: 0.5
Cumulative inches of rain for project: 1.3

See attached Contractor Production Report No. 10

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Forsberg, Jr. 06/12/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/12/06 Monday

REPORT NO. 10 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Rain

MIN TEMP: 57 | MAX TEMP: 69

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	8	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	5	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	8	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	2	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	5	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Weather Delay	T. COLLINS	SITE 57	TECH	2	0	SHAW E&I
Weather Delay	S. SMITH	SITE 57	LEAD OP.	2	0	FSSI
Weather Delay	E. ABNEY	SITE 57	TECH	2	0	SHAW E&I
Weather Delay	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Weather Delay	H. STICKLE	SITE 57	EQ. OP.	2	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**55.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	46.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	736
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	782.0

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

Shaw E&I
Chevy pickup

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Inspected Erosion and Sediment Controls

Weather delay

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/12/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 11
Date 6/13/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐	Definable feature/s of work
	SAMPLE HAS BEEN PREPARED/APPROVED	☑	☐	06 Contaminated Material Excavation and Handling Completed excavation of Area C. Continued excavating Area A. Located terra cotta piping and hand dug around.
	WORKMANSHIP IS SATISFACTORY	☑	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	05 Field Sampling and Offsite Analysis Collected confirmation samples from Areas B & C and shipped out for offsite analysis.
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST
Confirmation Sampling of Areas B & C Sampling performed by Adam Forshey and Tim Collins

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)	REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None	None

REMARKS:
Road barricades are installed around Area C to deter traffic from open excavation.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 1.3

See attached Contractor Production Report No. 11

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Forshey Jr. 6/13/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/13/06 Tuesday

REPORT NO. 11 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Sunny

MIN TEMP: 63

MAX TEMP: 84

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Excavation Area C & A	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Excavation Area C & A	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Excavation Area C & A	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
Excavation Area C & A	T. HURLEY	SITE 57	TECH	10	0	SHAW E&I
Excavation Area C & A	H. STICKLE	SITE 57	EQ. OP.	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**55.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	100.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	782
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	836.0

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP
2-Chevy pkup trk
Total Survey Station
Photovac 2020 (H&S)
PDR-1000 (H&S)
Gilibrator Kit (H&S)

SHAW EQUIP (continued)
1 - 320 Excavator

SUNBELT
Trencher -off rent 6-1-06

HERTZ

UNITED RENTALS
wheel loader w/ 5 cu yd bucket
1-Pick up Truck

WASTE MANAGEMENT
1 - 6yd Dumpster

FSSI
1 - Pickup truck

BURCH OIL
1 - 500 gal. fuel cells

William Scotsman

Allied Rentals
1 - Connex box

REMARKS

Check E&S controls

Excavate Area C - No obstructions found- excavate to minus 8ft.- move material to handling pad

Adam gathered samples from Area B&C

Excavate Area A - Found Terra Cotta Pipe at minus 6ft. Elev.- move material to handling pad

Uncovered and recovered Material handling pad

Installed Road Barricades at Excavation C and installed Orange Fence

Fuel Equipment

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/13/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 12
Date 6/14/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐	Definable feature/s of work
	SAMPLE HAS BEEN PREPARED/APPROVED	☑	☐	06 Contaminated Material Excavation and Handling Continued with excavation of Area A. Uncovered more of the Terra Cotta piping. Documented in photo log and will perform measurements once pipe is completely uncovered. Removed 15' of an abandoned ductile iron 12" line.
	WORKMANSHIP IS SATISFACTORY	☑	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐	05 Field Sampling and Offsite Analysis Completed Waste Characterization sampling and shipped to Accutest for analysis
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST
Waste Characterization Sampling Performed by Adam Forshey and Tim Collins

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)	REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None	None

REMARKS:

Approx. 65% of the excavation is complete in Area A. Broken terra cotta pipe will be removed and replaced with line supplied by Dave Stewart (per Jim Desmond).

Waiting on confirmation from TetraTech to begin backfill of excavation Areas B & C.

See attached Contractor Production Report No. 12

Inches of rain recorded at site trailer: 0.2
Cumulative inches of rain for project: 1.5

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Forshey Jr 06/14/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE:	06/14/06 Wednesday
REPORT NO.	12 page 1 of 1

PROJECT # 120359	TITLE AND LOCATION: Site 57, INDIAN HEAD, MD
CONTRACTOR: FSSI / SHAW	SITE SUPERINTENDENT: William Simpson
WEATHER/ WEATHER EFFECTS: Partly Cloudy with some rain	MIN TEMP: 62 / MAX TEMP: 70

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Excavation Area A	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Excavation Area A	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Excavation Area A	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
Excavation Area A	T. HURLEY	SITE 57	TECH	10	0	SHAW E&I
Excavation Area A	H. STICKLE	SITE 57	EQ. OP.	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**55.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	100.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	836
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	936.0

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Hand excavate around 12" corrugated pipe found pipe to have had prior damage at TOP of corrugated pipe est 8" rip, continued to hand excavate and found two one and half inch holes that appear to have been drilled thru the Terra Cotta Pipe also on the Top section of the pipe.

Jim Desmond - RIOCC - IH and Dave Stuart - Utilility Supervisor -IH were both present to take photos and witness the condition of the pipe.

Continue to excavate with excavator and relocate material to handling pad.

E&S Controls were inspected - no deficiences found

Traffic control for loader moving material to handling pad

H&S air monitoring

Excavation at 8ft.

Waste characterization samples taken from materials stock pile and shipped to Accutest for analysis

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/14/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 13
Date 6/15/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐	Definable feature/s of work 06 Contaminated Material Excavation and Handling Continued with excavation of Area A. Removed old-damaged terra cotta pipe (approx 20') and removed a smaller damaged corrugated metal pipe section (approx 5'). Got new corrugated pipe to replace old line. Secured all old lines that are to remain in place.
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☑	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST

Soil Sampling performed by Don at EarthCare (T&D contractor) today for their own lab analysis.

TESTING PERFORMED & WHO PERFORMED TEST

None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Approx. 95% of the excavation is complete in Area A.
Waiting on confirmation from TetraTech to begin backfill of excavation Areas B & C.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 1.5

See attached Contractor Production Report No. 13

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Forshey, Jr. 6/15/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/15/06 Thursday

REPORT NO. 13 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear and sunny

MIN TEMP: 61 | MAX TEMP: 81

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Excavation Area A	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Excavation Area A	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Excavation Area A	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
Excavation Area A	T. HURLEY	SITE 57	TECH	10	0	SHAW E&I
Excavation Area A	H. STICKLE	SITE 57	EQ. OP.	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**55.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	100.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	936		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1036.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

Stinnett's Gravel	DF Supplys	United Rental
2 - lds fill material	2 -15" x12ft sections Corrugated pipe	Plate tamper
	2 -15" corrugated steel bands	

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Continue to Hand excavate and probe around know lines in accordace to HS - 308 in AREA - A

Continue to excavate with excavator in Area - A and relocate material to handling pad

Removed 20lf of Terra Cotta pipe from AREA - A

Removed 5lf of corrugated pipe (with existing damage) from AREA - A

Received 2-lds of backfill material for Area B&C - stockpiled did not place in excavation

Check depth of excavation AREA - A

Secured three sections of Terra Cotta pipe - AREA - A

Secured one section of corrugated pipe exiting MH AREA - A

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/15/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 14
Date 6/16/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☑	☐
	THE SUBMITTALS HAVE BEEN APPROVED.	☑	☐
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☑	☐
	MATERIALS STORED PROPERLY.	☑	☐
	PRELIMINARY WORK WAS DONE CORRECTLY.	☑	☐
	TESTING PLAN HAS BEEN REVIEWED.	☑	☐
	WORK METHOD AND SCHEDULE DISCUSSED.	☑	☐
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☑	☐
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐
	SAMPLE HAS BEEN PREPARED/APPROVED	☑	☐
	WORKMANSHIP IS SATISFACTORY	☑	☐
	TEST RESULTS ARE ACCEPTABLE.	☑	☐
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐

IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT

Definable feature/s of work

07 Site Restoration
Discussed backfilling restoration items. Entire preparatory for Site Restoration will be held Monday 06/19/06.

Definable feature/s of work

07 Site Restoration
Completed backfill of Area B with approved common fill from Stinnetts. Installed soil at 8" lifts and conducted desity testing at an average of 1 test per lift.

TESTING PERFORMED & WHO PERFORMED TEST

Troxler Nuclear Density Testing

Performed by Brice from Bob Taylor Engineering.

Definable feature/s of work

06 Contaminated Material Excavation and Handling
Completed excavation of Area A. All excavations are complete. Awaiting analytical results and discussion to determine if any more digging will be required. Damaged piping replaced in Area A with corrugated metal. Pipe supported with timbers until backfill can be placed.

TESTING PERFORMED & WHO PERFORMED TEST

None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Received analytical results for confirmation sampling of Areas B & C. B is clean. C has some arsenic hot spots to be discussed Monday June 19.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 1.5

See attached Contractor Production Report No. 14

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Frosch, Jr. 06/16/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/16/06 Friday

REPORT NO. 14 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Sunny

MIN TEMP: 62

MAX TEMP: 84

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Excavation Area A	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Excavation Area A	S. SMITH	SITE 57	LEAD OP.	0	0	FSSI
Excavation Area A	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
Excavation Area A	T. HURLEY	SITE 57	TECH	10	0	SHAW E&I
Excavation Area A	H. STICKLE	SITE 57	EQ. OP.	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**55.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	90.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1036		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1126.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

Stinnett's Gravel
4 - lds fill material

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Start to backfill Area B according to Specs, placing material in 8 inch lifts and compact with plate tamper

Bob Taylor Engineering (BTE) on site to perform density test in Area B - all lifts meet the required 90 %

Continue to Hand excavate and probe around known lines in accordace to HS - 308 in AREA - A

Continue to excavate with excavator in Area - A and relocate material to handling pad

Received results on analatical - Area B no hits

Area C results will be reviewed on Monday 6-19-06

Received 4 - lds of backfill material for Area B&C -

Check depth of excavation AREA - A

Secured and installed one section of corrugated metal pipe 17" and installed one connection ring

Built a wooden frame to suspend corrugated pipe in place until bacfill material is placed and compacted

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/16/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 15
Date 6/17/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT	
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None	
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐		
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐		
	MATERIALS STORED PROPERLY.	☐	☐		
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐		
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐		
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐		
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐		
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None	TESTING PERFORMED & WHO PERFORMED TEST None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐		
	WORKMANSHIP IS SATISFACTORY	☐	☐		
	TEST RESULTS ARE ACCEPTABLE.	☐	☐		
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐		
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐		
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None	TESTING PERFORMED & WHO PERFORMED TEST None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐		
	Performed daily inspection of E&S controls; See onsite inspection form log				

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Performed basic site maintance and received 4 more loads of select fill material from Stinnetts Gravel for backfill.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 1.5

See attached Contractor Production Report No. 15

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Frosley, Jr. 06/17/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/17/06 Saturday

REPORT NO. 15 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Sunny

MIN TEMP: 66

MAX TEMP: 82

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	0	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	5	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	0	0	SHAW E&I
Excavation Area A	T. COLLINS	SITE 57	TECH	6	0	SHAW E&I
Site Restoration	S. SMITH	SITE 57	LEAD OP.	0	0	FSSI
Site Restoration	E. ABNEY	SITE 57	TECH	6	0	SHAW E&I
Site Restoration	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Per. Demobe	H. STICKLE	SITE 57	EQ. OP.	0	7*	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					7*	
TOTAL PROJECT TRAVEL HRS					**62.5**	

JOB SAFETY		
	JOB SAFETY MEETING HELD THIS DATE?	YES
	ANY LOST TIME ACCIDENTS THIS DATE?	NO
	TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO
	WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO
	(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)	

TOTAL WORK HOURS ON THIS DATE	17.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1126		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1143.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

Stinnett's Gravel
4 - lds fill material

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6ytl Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Received 4 - lds of backfill material for Area C
Covered clean backfill material
Cleaned and secured the area for the week end.
No work planned for Sunday 6-18-06

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/17/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/19/06 Monday

REPORT NO. 16 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Sunny

MIN TEMP: 68 | MAX TEMP: 87

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	8	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	6	0	SHAW E&I
Excavation Area A	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Excavation Area A	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Excavation Area A	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
Excavation Area A	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**62.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	74.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1143		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1209.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

Stinnett's Gravel

Sunbelt Rentals
17" Walk behind concrete saw/w blade

EQUIPMENT ON SITE

SHAW EQUIP
2-Chevy pkup trk
Total Survey Station
Photovac 2020 (H&S)
PDR-1000 (H&S)
Gilibrator Kit (H&S)

SHAW EQUIP (continued)
1 - 320 Excavator

SUNBELT
Trencher -off rent 6-1-06

HERTZ

UNITED RENTALS
wheel loader w/ 5 cu yd bucket
1-Pick up Truck

WASTE MANAGEMENT
1 - 6yd Dumpster

FSSI
1 - Pickup truck

BURCH OIL
1 - 500 gal. fuel cells

William Scotsman

Allied Rentals
1 - Connex box

REMARKS

Compete installation of corrugated pipe in Area A
Cut additional asphalt at Area C
Assist Tetra Tech in grabbing samples from Area A
Discussed sample results from Area C. More excavation will be required. Proposed to excavate another 2 ft., awaiting approval.
Site housekeeping and material storage pad checked.

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/19/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 16
Date 6/19/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☑	☐
	THE SUBMITTALS HAVE BEEN APPROVED.	☑	☑
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☑	☐
	MATERIALS STORED PROPERLY.	☑	☐
	PRELIMINARY WORK WAS DONE CORRECTLY.	☑	☐
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐
	WORK METHOD AND SCHEDULE DISCUSSED.	☑	☐
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☑	☐
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐
	SAMPLE HAS BEEN PREPARED/APPROVED	☑	☐
	WORKMANSHIP IS SATISFACTORY	☑	☐
	TEST RESULTS ARE ACCEPTABLE.	☑	☑
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐

IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT

Definable feature/s of work

08 Site Restoration
Conducted entire site restoration preparatory meeting. Cano Hernandez acted as QC manager in Adam Forshey's absence. See attached Preparatory meeting checklist.

Definable feature/s of work

05 Field Sampling and Offsite Analysis
Confirmation samples taken from Area A for analysis. Results for Area C discussed, more excavating will be required. Waiting for approval to dig.

TESTING PERFORMED & WHO PERFORMED TEST

Confirmation Sampling performed in Area A by Tetra Tech.

Definable feature/s of work

06 Contaminated Material Excavation and Handling
Completed installation of corrugated metal pipe in Area A. Cut more asphalt as prep for re-excavation of Area C.

TESTING PERFORMED & WHO PERFORMED TEST

None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
More excavation is required in Area C. Waiting for approval to dig.

Inches of rain recorded at site trailer: 0.2
Cumulative inches of rain for project: 1.7

See attached Contractor Production Report No. 16

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

QC MANAGER — 6-19-06 DATE
FOR Adam Forshey 6-20-06

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

PREPARATORY PHASE CHECKLIST

(CONTINUED ON SECOND PAGE)

SPEC SECTION	DATE
Final Work Plan – Section 3.8	06/19/06

CONTRACT NO	DEFINABLE FEATURE OF WORK	SCHEDULE ACT NO.	INDEX #
N62470-03-D-4402	Site Restoration	20004000	08

PERSONNEL PRESENT

GOVERNMENT REP NOTIFIED __48__ HOURS IN ADVANCE: YES ☒ NO ☐

NAME	POSITION	COMPANY/GOVERNMENT
Bill Simpson	Site Superintendent	FSSI
Cano Hernandez	Operations Supervisor/Sub. QC Manager	Shaw
Jim Wright	Health and Safety	Shaw
Crew – See Contractor Production Report		FSSI / Shaw

SUBMITTALS

REVIEW SUBMITTALS AND/OR SUBMITTAL REGISTER. HAVE ALL SUBMITTALS BEEN APPROVED? YES ☐ NO ☒

IF NO, WHAT ITEMS HAVE NOT BEEN SUBMITTED? Back fill has been approved. Awaiting lab analysis and submittal of Topsoil. Also need technical specs on asphalt from asphalt sub and seed, fertilizer, and mulch from sub.

ARE ALL MATERIALS ON HAND? YES ☐ NO ☒

IF NO, WHAT ITEMS ARE MISSING? Back fill is on hand, topsoil is available pending approval, asphalt and seeding to be performed by a subcontractor.

CHECK APPROVED SUBMITTALS AGAINST DELIVERED MATERIAL. (THIS SHOULD BE DONE AS MATERIAL ARRIVES.)

COMMENTS:

MATERIAL STORAGE

ARE MATERIALS STORED PROPERLY? YES ☒ NO ☐

IF NO, WHAT ACTION IS TAKEN?

SPECIFICATIONS

REVIEW EACH PARAGRAPH OF SPECIFICATIONS. Reviewed the applicable paragraphs of the work plan for Site 57 (Performed by Cano Hernandez in Adam Forshey's absence).

DISCUSS PROCEDURE FOR ACCOMPLISHING THE WORK. Site Restoration – Reviewed procedure for backfill placement. Backfill soils have been approved by the GOVT. Perform compaction test at an average of one test for each 8" lift. Topsoil will be installed upon GOVT approval of soils (waiting on analytical) reviewed Procedures for placing topsoil and grading. Discussed asphalt replacement and areas that will be repaired. Reviewed asphalt installation procedures, will Review again with asphalt sub. Seeding, fertilizing, and mulching activities reviewed.

CLARIFY ANY DIFFERENCES. Measurements will need to be taken for additional asphalt repairs.

PRELIMINARY WORK & PERMITS

ENSURE PRELIMINARY WORK IS CORRECT AND PERMITS ARE ON FILE.

IF NOT, WHAT ACTION IS TAKEN?

Backfill Submittal (approved) (GOVT)

Topsoil Submittal (Waiting for analytical) (GOVT)

Needs submittal approval for seeding, fertilizer, and mulch (CONTR)

Need submittal approval for asphalt sub (CONTR)

TESTING

IDENTIFY TEST TO BE PERFORMED, FREQUENCY, AND BY WHOM. Compaction testing will be performed throughout all backfill operations. An average of one Compaction test will be taken for each 8" lift that is placed. Testing will be performed by Bob Taylor Engineering.

WHEN REQUIRED? Throughout backfill.

WHERE REQUIRED? All excavated areas (Areas A, B, and C)

REVIEW TESTING PLAN.

HAS TEST FACILITIES BEEN APPROVED? Previously approved Troxler density testing techniques to be implemented.

SAFETY

ACTIVITY HAZARD ANALYSIS APPROVED? YES ☒ NO ☐

REVIEW APPLICABLE PORTION OF EM 385-1-1. AHA reviewed by Jim Wright

MEETING COMMENTS

NAVY/ROICC COMMENTS DURING MEETING.

No Navy personnel present at meeting.

OTHER ITEMS OR REMARKS

OTHER ITEMS OR REMARKS:

Lane Horsch 6/19/06

QC MANAGER DATE

FOR Adam Forshey 6/20/06

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 17
Date 6/20/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)	REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None	None

REMARKS:
No work was performed today due to rainy weather conditions.

Inches of rain recorded at site trailer: 0.3
Cumulative inches of rain for project: 2.0

See attached Contractor Production Report No. 17

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Robert J. Flossley, Jr. 6/20/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/20/06 Tuesday

REPORT NO. 17 page 1 of 1

PROJECT # 120359

TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Light showers

MIN TEMP: 66

MAX TEMP: 87

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	2	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	5	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Rain Delay	T. COLLINS	SITE 57	TECH	3	0	SHAW E&I
Rain Delay	S. SMITH	SITE 57	LEAD OP.	6	0	FSSI
Rain Delay	E. ABNEY	SITE 57	TECH	3	0	SHAW E&I
Rain Delay	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**62.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	49.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1217		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1266.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP
2-Chevy pkup trk
Total Survey Station
Photovac 2020 (H&S)
PDR-1000 (H&S)
Gilibrator Kit (H&S)

SHAW EQUIP (continued)
1 - 320 Excavator

SUNBELT
Trencher -off rent 6-1-06

HERTZ

UNITED RENTALS
wheel loader w/ 5 cu yd bucket
1-Pick up Truck

WASTE MANAGEMENT
1 - 6yd Dumpster

FSSI
1 - Pickup truck

BURCH OIL
1 - 500 gal. fuel cells

William Scotsman

Allied Rentals
1 - Connex box

REMARKS

Rain Delay

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/20/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/21/06 Wednesday

REPORT NO. 18 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Partly Cloudy

MIN TEMP: 72

MAX TEMP: 86

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Excavation	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Excavation	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Excavation	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
Excavation	T. HURLEY	SITE 57	TECH	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**62.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	90.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1266
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1356.0

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Re - excavate Area C

Re - sample Area C

Load out two lds of debris (asphalt and concrete) Manifest were issued

Checked and filled sandbags where needed.

Secured materail storage pad and clean backfill material piles.

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/21/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 18
Date 6/21/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 06 Contaminated Material Excavation and Handling Re-excavated Area C in areas where there were high concentrations of Arsenic (south side and out into road more). 05 Field Sampling and Offsite Analysis Completed re-sampling of Area C. Results should be back by Monday June 26.
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST

None

TESTING PERFORMED & WHO PERFORMED TEST

Re-Confirmation Sampling of Area C was performed by Adam Forshey.

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Received Topsoil analytical and sent out submittal for approval today. Also held bi-weekly meeting.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 2.0

See attached Contractor Production Report No. 18

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Forshey Jr 6/21/06

QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 19
Date 6/22/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)	REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None	None

REMARKS:
No work performed today. Waiting for sample results (waste char. & confirm.)
Inspected site, noticed damages to the smoking gazebo screens. These are not believed to have been caused by FSSI/Shaw. Mostly just from deteriation of screen material.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 2.0

See attached Contractor Production Report No. 19

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Forshey Jr. 6/22/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/22/06 Thursday

REPORT NO. 19 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear

MIN TEMP: 74 | MAX TEMP: 92

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	6	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	2	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	5	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Excavation	T. COLLINS	SITE 57	TECH	0	0	SHAW E&I
Excavation	S. SMITH	SITE 57	LEAD OP.	0	0	FSSI
Excavation	E. ABNEY	SITE 57	TECH	0	0	SHAW E&I
Excavation	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**62.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	43.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1356		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1399.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Awaiting Analatical results on Area A

Awaiting Analatical results on material in the Material Handling Pad

Awaiting results from Area C

Awaiting Analatical results on Top Soil

Checked E&S features

Visitors; Ernie Duke - Shaw E&I QC Manager

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/22/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 20
Date 6/23/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☑	☐
	THE SUBMITTALS HAVE BEEN APPROVED.	☑	☑
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐
	MATERIALS STORED PROPERLY.	☑	☐
	PRELIMINARY WORK WAS DONE CORRECTLY.	☑	☐
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐
	WORK METHOD AND SCHEDULE DISCUSSED.	☑	☐
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☑	☐
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐
	SAMPLE HAS BEEN PREPARED/APPROVED	☑	☐
	WORKMANSHIP IS SATISFACTORY	☑	☐
	TEST RESULTS ARE ACCEPTABLE.	☑	☐
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐

IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT

Definable feature/s of work

07 Material Transportation and Disposal
Conducted preparatory meeting for T&D of Haz. Soils.
See attached Preparatory Checklist 07.

Definable feature/s of work

08 Site Restoration
Began backfilling excavation Area A. Placed 1 8" lift over western portion of excavation. Compaction testing will be performed by Bob Taylor Engineering on Monday.

TESTING PERFORMED & WHO PERFORMED TEST

None

Definable feature/s of work

None

TESTING PERFORMED & WHO PERFORMED TEST

None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

None

REMARKS:

See attached Preparatory Checklist 07.
Received confimation results for Area A. Waiting for guidance on if more excavation will be required for the eastern wall along the culvert.
Topsoil analytical approved.
See attached Contractor Production Report No. 20

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 2.0

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Florshey, Jr. 6/23/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/23/06 Friday

REPORT NO. 20 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear

MIN TEMP: 71

MAX TEMP: 86

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	8	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Site Restoration / Backfill Area A	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Site Restoration / Backfill Area A	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Site Restoration / Backfill Area A	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
Site Restoration / Backfill Area A	T. HURLEY	SITE 57	TECH	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**62.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	98.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1399		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1497.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP
2-Chevy pkup trk
Total Survey Station
Photovac 2020 (H&S)
PDR-1000 (H&S)
Gilibrator Kit (H&S)

SHAW EQUIP (continued)
1 - 320 Excavator

SUNBELT
Trencher -off rent 6-1-06

HERTZ

UNITED RENTALS
wheel loader w/ 5 cu yd bucket
1-Pick up Truck

WASTE MANAGEMENT
1 - 6yd Dumpster

FSSI
1 - Pickup truck

BURCH OIL
1 - 500 gal. fuel cells

William Scotsman

Allied Rentals
1 - Connex box

REMARKS

Start to backfill Area A in 8" lifts and compact,
Did not backfill all the way across, will continue with backfill Monday
Attended Preparatory Meeting for T&D.
Confirmation results back for Area A. Waiting for guidance to see if more excavation will be required.
Topsoil Analytical approved.

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/23/2006

GOVERNMENT INSPECTOR DATE

PREPARATORY PHASE CHECKLIST

(CONTINUED ON SECOND PAGE)

SPEC SECTION	DATE
Final Work Plan – Section 3.7	06/23/06

CONTRACT NO	DEFINABLE FEATURE OF WORK	SCHEDULE ACT NO.	INDEX #
N62470-03-D-4402	Material Transportation and Disposal	19020010	07

PERSONNEL PRESENT

GOVERNMENT REP NOTIFIED __48_ HOURS IN ADVANCE: *Notified 24 hours in advance YES ☐ NO ☒

NAME	POSITION	COMPANY/GOVERNMENT
Bill Simpson	Site Superintendent	FSSI
Cano Hernandez	Operations Supervisor/Sub. QC Manager	Shaw
Jim Wright	Health and Safety	Shaw
Jim Desmond	ROICC Inspector	NAVY
Crew – See Contractor Production Report		FSSI / Shaw

SUBMITTALS

REVIEW SUBMITTALS AND/OR SUBMITTAL REGISTER. HAVE ALL SUBMITTALS BEEN APPROVED? YES ☐ NO ☒

IF NO, WHAT ITEMS HAVE NOT BEEN SUBMITTED? Waste Characterization results came in this morning, need to be submitted to the Navy. Also need a Facility Permit to be submitted.

ARE ALL MATERIALS ON HAND? YES ☒ NO ☐

IF NO, WHAT ITEMS ARE MISSING?

CHECK APPROVED SUBMITTALS AGAINST DELIVERED MATERIAL. (THIS SHOULD BE DONE AS MATERIAL ARRIVES.)

COMMENTS:

MATERIAL STORAGE

ARE MATERIALS STORED PROPERLY? YES ☒ NO ☐

IF NO, WHAT ACTION IS TAKEN?

SPECIFICATIONS

REVIEW EACH PARAGRAPH OF SPECIFICATIONS. Reviewed applicable paragraph of the work plan. An estimated 1000 cubic yards of soil will be disposed of. Discussed waste characterization results. Because there was a trace amount of TCE in the samples, we must treat the material as a Hazardous Waste. We must Also maintain records of the shipping waste manifests. Original manifests from the facility will go to the Navy and copies will be kept for the closeout report.

DISCUSS PROCEDURE FOR ACCOMPLISHING THE WORK. Work will be performed in accordance with the work plan procedures discussed. We will load trucks With the material from the material handling pad. Discussed taking caution while moving bucket with soil in it (do not spill) to prevent cross contamination. Lay down liner where necessary to prevent material from falling onto the ground. Be alert and aware of your surroundings (overhead lines) while loading Trucks.

CLARIFY ANY DIFFERENCES. None

PRELIMINARY WORK & PERMITS

ENSURE PRELIMINARY WORK IS CORRECT AND PERMITS ARE ON FILE.

IF NOT, WHAT ACTION IS TAKEN? Permits are being obtained today (Submittal approval for waste characterization and facility permit from approved disposal facility).

TESTING	IDENTIFY TEST TO BE PERFORMED, FREQUENCY, AND BY WHOM. None WHEN REQUIRED? WHERE REQUIRED? REVIEW TESTING PLAN. HAS TEST FACILITIES BEEN APPROVED?
SAFETY	ACTIVITY HAZARD ANALYSIS APPROVED? YES ☒ NO ☐ REVIEW APPLICABLE PORTION OF EM 385-1-1. AHA reviewed by Cano Hernandez.
MEETING COMMENTS	NAVY/ROICC COMMENTS DURING MEETING. Jim Desmond will show us an alternative haul route for the truckers. This will prevent any complicated turn arounds or traffic conjestion.
OTHER ITEMS OR REMARKS	OTHER ITEMS OR REMARKS: None

Adam Forshey Jr. 6/23/06

QC MANAGER DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 21
Date 6/26/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls after rain event; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)	REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None	None

REMARKS:
No work performed today due to rainy weather conditions.
Large amounts of rainfall over the weekend (approx. 4.6" including today).
Excavation walls still in good condition.

Inches of rain recorded at site trailer: 4.6
Cumulative inches of rain for project: 6.6

See attached Contractor Production Report No. 21

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Florshey, Jr. 06/26/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/26/06 Monday

REPORT NO. 21 page 1 of 1

PROJECT # 120359

TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Cloudy with scattered showers

MIN TEMP: 72

MAX TEMP: 81

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	6	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	2	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Site Restoration / Backfill Area A	T. COLLINS	SITE 57	TECH	0	0	SHAW E&I
Site Restoration / Backfill Area A	S. SMITH	SITE 57	LEAD OP.	0	0	FSSI
Site Restoration / Backfill Area A	E. ABNEY	SITE 57	TECH	0	0	SHAW E&I
Site Restoration / Backfill Area A	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**62.5**	

JOB SAFETY		
	JOB SAFETY MEETING HELD THIS DATE?	YES
	ANY LOST TIME ACCIDENTS THIS DATE?	NO
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?		NO
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?		NO
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	98.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1497		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1595.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

No field work performed today due to rainy weather conditions.
E&S controls inspected after rain event. All E&S is in good condition.

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/26/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 22
Date 6/27/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST: None

07 Material Transportation and Disposal
Began T&D of soils. Loaded 16 trucks (an estimated 368 tons of soil). Haz materials are being shipped to Wayne Disposal, Inc. Site #2 Belleville MI. Copies of waste manifests have been obtained.

An estimated 4.5 ft of water remains accumulated in Area C excavation. Some water has also collected in the southeast section of Area A.
Performed daily inspection of E&S controls after rain event; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Received confirmation results from Area C. Still hits of arsenic. No further excavation required (per Jeff Morris), explanation to be provided to us.
Everyone approves to go ahead and backfill Area A.
No backfill today because of weather conditions. Stinnett's pit too muddy to access.
See attached Contractor Production Report No. 22

Inches of rain recorded at site trailer: 1.3
Cumulative inches of rain for project: 7.9

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Robert Fordney, Jr. 06/27/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/27/06 Tuesday

REPORT NO. 22 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Heavy rains early turning to cloudy skies with occasional scattered rainfall

MIN TEMP: 73 | MAX TEMP: 81

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	4	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Site Restoration / Backfill Area A	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Site Restoration / Backfill Area A	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Site Restoration / Backfill Area A	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
Site Restoration / Backfill Area A	T. HURLEY	SITE 57	TECH	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**62.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	84.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1535
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1619.0

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Began T&D of excavated soils.

Loaded 16 trucks (estimated 368 tons of soil)

No backfill operations could be performed today because Ed Stinnett cannot access his pit.

Investigated the site and excavations after rain event.

Covered materail storage pad and secured for the evening.

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/27/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/28/06 Wednesday

REPORT NO. 23 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Sunny and clear

MIN TEMP: 71

MAX TEMP: 84

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
Site Restoration / Backfill Area A	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
Site Restoration / Backfill Area A	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
Site Restoration / Backfill Area A	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
Site Restoration / Backfill Area A	T. HURLEY	SITE 57	TECH	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**62.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	90.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1619		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1709.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Continued with T&D of excavated soil. Loaded 15 trucks today (estimated 345 tons).

Performed routine site maintanance and cleaning

Continued to monitor water levels in excavations.

Reshaped and covered pile at the end of the day.

Copied all waste manifests.

Pre-final site walk has been rescheduled for July 6 at 1300 hours.

Shaw Trucks 100664 and 100191 serviced yesterday.

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/28/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 23
Date 6/28/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST: None

07 Material Transportation and Disposal
Continued T&D of soils. Loaded 15 trucks (an estimated 345 tons of soil). Haz materials are being shipped to Wayne Disposal, Inc. Site #2 Belleville MI. Copies of waste manifests have been obtained. An estimated 10 truck loads of material remain.

An estimated 4 ft of water remains accumulated in Area C excavation.

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Pre-final site walk has been rescheduled for Thursday July 6, 2006 at 1300 hours.
Submittal 004 (Facility Permit) was sent to the GOVT today as a FIO item.
Backfill scheduled with Ed Stinnett for Friday AM.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 7.9

See attached Contractor Production Report No. 23

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Florshey, Jr. 06/28/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 24
Date 6/29/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐
	MATERIALS STORED PROPERLY.	☐	☐
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐
	WORKMANSHIP IS SATISFACTORY	☑	☐
	TEST RESULTS ARE ACCEPTABLE.	☐	☐
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐

IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT

PREPARATORY

Definable feature/s of work

None

INITIAL

Definable feature/s of work

08 Site Restoration
Preped Area A for backfill operations to take place tomorrow.

TESTING PERFORMED & WHO PERFORMED TEST

None

FOLLOW-UP

Definable feature/s of work

07 Material Transportation and Disposal
Completed T&D of soils. Loaded 13 trucks (an estimated 299 tons of soil). Haz materials are being shipped to Wayne Disposal, Inc. Site #2 Belleville MI. Copies of waste manifests have been obtained. An estimated 1012 tons of soil was shipped total. The liner, poly, and contaminated sand were shipped out with haz soils.

An estimated 3 ft of water remains accumulated in Area C excavation.

Performed daily inspection of E&S controls; See onsite inspection form log

TESTING PERFORMED & WHO PERFORMED TEST

None

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Deconing of the excavator began today. Water was collected and stored in drums for appropriate disposal.

Inches of rain recorded at site trailer: 0.1
Cumulative inches of rain for project: 8.0

See attached Contractor Production Report No. 24

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Forshey Jr. 06/29/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/29/06 Thursday

REPORT NO. 24 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Sunny and clear

MIN TEMP: 67

MAX TEMP: 83

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	10	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	0	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10	0	SHAW E&I
T&D of Material Handling Pad	T. COLLINS	SITE 57	TECH	10	0	SHAW E&I
T&D of Material Handling Pad	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
T&D of Material Handling Pad	E. ABNEY	SITE 57	TECH	10	0	SHAW E&I
T&D of Material Handling Pad	T. HURLEY	SITE 57	TECH	10	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**62.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	80.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1619		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1699.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Completed transportation and disposal of all Haz. Soils and materail storage pad liner.

Loaded 13 trucks today (est. 299 tons) for a total of approx. 1012 tons of soil. Collected waste manifests for copying and records

Stockpiled clean sand.

Cleaned site and began deconing excavator.

Backfill to continue tomorrow.

Preped Area A for backfill.

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/29/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 25
Date 6/30/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST

None

TESTING PERFORMED & WHO PERFORMED TEST

Troxler Nuclear Density Testing

Performed by Bob Taylor Engineering

08 Site Restoration

Continued backfilling of Area A with approved soils from Stinnetts Gravel. Backfill was placed at 8" lifts and compacted to greater the 90%. All tests were above 90% (test results to be submitted at a later date). Received 32 loads of soil from Stinnetts. Excess soil was stockpiled and covered. Estimated 75% of Area A has been backfilled.

An estimated 2 ft of water remains accumulated in Area C excavation.

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Some accumulated water still remains in the most southeast section of Area A and approx. 2 ft. in Area C.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 8.0

See attached Contractor Production Report No. 25

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Forsberg, Jr. 6/30/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06/30/06 Friday

REPORT NO. 25 page 1 of 1

PROJECT # 120359

TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Sunny and clear

MIN TEMP: 62

MAX TEMP: 83

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	8	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	9	3.5	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	8	0	SHAW E&I
T&D of Material Handling Pad	T. COLLINS	SITE 57	TECH	5	2	SHAW E&I
T&D of Material Handling Pad	S. SMITH	SITE 57	LEAD OP.	10	0	FSSI
T&D of Material Handling Pad	E. ABNEY	SITE 57	TECH	0	5	SHAW E&I
T&D of Material Handling Pad	T. HURLEY	SITE 57	TECH	5	3	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**76**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	55.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1699		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1754.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

Backfill (32 Loads)

EQUIPMENT ON SITE

SHAW EQUIP
2-Chevy pkup trk
Total Survey Station
Photovac 2020 (H&S)
PDR-1000 (H&S)
Gilibrator Kit (H&S)

SHAW EQUIP (continued)
1 - 320 Excavator

SUNBELT
Trencher -off rent 6-1-06

HERTZ

UNITED RENTALS
wheel loader w/ 5 cu yd bucket
1-Pick up Truck

WASTE MANAGEMENT
1 - 6yd Dumpster

FSSI
1 - Pickup truck

BURCH OIL
1 - 500 gal. fuel cells

William Scotsman

Allied Rentals
1 - Connex box

REMARKS

Continued backfilling of Area A at 8" lifts

Bob Taylor Engineering on site to perform compaction testing on backfilled soils in Area A.

Stockpiled backfill soils and covered.

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 6/30/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 26
Date 7/1/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT	
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None	
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐		
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐		
	MATERIALS STORED PROPERLY.	☐	☐		
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐		
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐		
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐		
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐		
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None	TESTING PERFORMED & WHO PERFORMED TEST None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐		
	WORKMANSHIP IS SATISFACTORY	☐	☐		
	TEST RESULTS ARE ACCEPTABLE.	☐	☐		
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐		
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐		
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None	TESTING PERFORMED & WHO PERFORMED TEST None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐		
	Performed daily inspection of E&S controls; See onsite inspection form log				

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Performed site housekeeping and covered material stockpile (backfill) in case of a rain event over the holidays.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 8.0

See attached Contractor Production Report No. 26

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Forshey Jr 7/1/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/01/06 Saturday

REPORT NO. 26 page 1 of 1

PROJECT # 120359

TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Sunny and clear

MIN TEMP: 62

MAX TEMP: 86

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	0	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	4	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	0	0	SHAW E&I
Backfill Area A	T. COLLINS	SITE 57	TECH	4	0	SHAW E&I
Backfill Area A	S. SMITH	SITE 57	LEAD OP.	0	0	FSSI
Backfill Area A	E. ABNEY	SITE 57	TECH	0	0	SHAW E&I
Backfill Area A	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**76**	

JOB SAFETY					
	JOB SAFETY MEETING HELD THIS DATE?	YES	TOTAL WORK HOURS ON THIS DATE	8.0	
	ANY LOST TIME ACCIDENTS THIS DATE?	NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1699	
	TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO			
	WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1707.0	
	(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)				

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP
2-Chevy pkup trk
Total Survey Station
Photovac 2020 (H&S)
PDR-1000 (H&S)
Gilibrator Kit (H&S)

SHAW EQUIP (continued)
1 - 320 Excavator

SUNBELT
Trencher -off rent 6-1-06

HERTZ

UNITED RENTALS
wheel loader w/ 5 cu yd bucket
1-Pick up Truck

WASTE MANAGEMENT
1 - 6yd Dumpster

FSSI
1 - Pickup truck

BURCH OIL
1 - 500 gal. fuel cells

William Scotsman

Allied Rentals
1 - Connex box

REMARKS

Performed site housekeeping and covered stockpiled materials.

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/1/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 27
Date 7/3/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

TESTING PERFORMED & WHO PERFORMED TEST
None

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)	REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None	None

REMARKS:
No work was performed onsite today because of crew rotation.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 8.0

See attached Contractor Production Report No. 27

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Forshey Jr 7/3/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/03/06 Monday

REPORT NO. 27 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Sunny and clear

MIN TEMP: 73

MAX TEMP: 90

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	9	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	0	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	7	0	SHAW E&I
Backfill Area A	T. COLLINS	SITE 57	TECH	0	0	SHAW E&I
Backfill Area A	S. SMITH	SITE 57	LEAD OP.	0	0	FSSI
Backfill Area A	E. ABNEY	SITE 57	TECH	0	0	SHAW E&I
Backfill Area A	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**76**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	16.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1707		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1723.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

No work performed onsite today. Crew on rotation.

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/3/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 28
Date 7/4/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

TESTING PERFORMED & WHO PERFORMED TEST
None

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)	REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None	None

REMARKS:
Company holiday, no work performed today.
Some rainfall occurred in the late evening.

Inches of rain recorded at site trailer: 0.5
Cumulative inches of rain for project: 8.5

See attached Contractor Production Report No. 28

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Floodberg, Jr 7/4/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE:	07/04/06 Tuesday
REPORT NO.	28 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Cloudy with some rainfall

MIN TEMP: 87 | MAX TEMP: 94

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0	0	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0	0	FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	0	0	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0	0	SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	0	0	SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	0	0	SHAW E&I
Backfill Area A	T. COLLINS	SITE 57	TECH	0	0	SHAW E&I
Backfill Area A	S. SMITH	SITE 57	LEAD OP.	0	0	FSSI
Backfill Area A	E. ABNEY	SITE 57	TECH	0	0	SHAW E&I
Backfill Area A	T. HURLEY	SITE 57	TECH	0	0	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**76**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	0.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1723
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1723.0

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

EQUIPMENT\MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	HERTZ	UNITED RENTALS	FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06		wheel loader w/ 5 cu yd bucket	1 - Pickup truck	
Total Survey Station				1-Pick up Truck		
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

No work performed on site today. Company holiday.

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/4/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 29
Date 7/5/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Completed backfilling of Area A and compacting. Soil was placed in 8" lifts, compacted, and tested by Bob Taylor Engineering. A total of 30 density tests (avg. of approx 3 tests per lift) were taken in Area A. All tests passed and data will be submitted from BTE at a later date. Area C remains to be backfilled.
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	
	Performed daily inspection of E&S controls; See onsite inspection form log			

TESTING PERFORMED & WHO PERFORMED TEST
None

TESTING PERFORMED & WHO PERFORMED TEST
Troxler Nuclear Gauge Density Testing Performed by Bob Taylor Engineering

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Conducted survey of the three excavation areas (footprint, corrugated pipe in Area A, and valve in Area B).

Inches of rain recorded at site trailer: 1.2
Cumulative inches of rain for project: 9.7

See attached Contractor Production Report No. 29

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Forsley Jr. 7/5/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/05/06 Wednesday

REPORT NO. 29 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Cloudy skies with afternoon rain showers

MIN TEMP: 71 | MAX TEMP: 84

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	7	3.5	SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10		SHAW E&I
Backfill Area A	T. COLLINS	SITE 57	TECH	10	2	SHAW E&I
Backfill Area A	S. SMITH	SITE 57	LEAD OP.	0		FSSI
Backfill Area A	E. ABNEY	SITE 57	TECH	4.5	6	SHAW E&I
Backfill Area A	T. HURLEY	SITE 57	TECH	10	3.5	SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					15	
TOTAL PROJECT TRAVEL HRS					**89.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	61.5		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1723		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1784.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP
2-Chevy pkup trk
Total Survey Station
Photovac 2020 (H&S)
PDR-1000 (H&S)
Gilibrator Kit (H&S)

SHAW EQUIP (continued)
1 - 320 Excavator

SUNBELT
Trencher -off rent 6-1-06

HERTZ

UNITED RENTALS
wheel loader w/ 5 cu yd bucket
1-Pick up Truck

WASTE MANAGEMENT
1 - 6yd Dumpster

FSSI
1 - Pickup truck

BURCH OIL
1 - 500 gal. fuel cells

William Scotsman

Allied Rentals
1 - Connex box

REMARKS

Completed backfill of Excavation Area A

Compacted soil at 8" lifts and tested (Bob Taylor Engineering onsite to do Troxler Testing)

Covered soil stockpile before rainfall

Surveyed the footprint of all three excavations, corrugated metal pipe through Area A, and valve in Area B

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/5/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 30
Date 7/6/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT	
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None	
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐		
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐		
	MATERIALS STORED PROPERLY.	☐	☐		
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐		
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐		
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐		
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐		
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None	TESTING PERFORMED & WHO PERFORMED TEST None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐		
	WORKMANSHIP IS SATISFACTORY	☐	☐		
	TEST RESULTS ARE ACCEPTABLE.	☐	☐		
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐		
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐		
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Began backfill of Area C by placing stone in excavation to stabilize water. Will wait for water level to drop before adding more stone or any backfill. Swept street and staging area with sweeper. Began concrete repair to culvert by removing damaged concrete.	TESTING PERFORMED & WHO PERFORMED TEST None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐		
	Performed daily inspection of E&S controls; See onsite inspection form log				

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)	REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None	None

REMARKS:
Conducted pre-final meeting at the site and generated a punch list of items that remain to be completed (see attached punch list).

Inches of rain recorded at site trailer: 0.1
Cumulative inches of rain for project: 9.7

See attached Contractor Production Report No. 30

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Robert Forsher Jr 7/6/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/06/06 Thursday

REPORT NO. 30 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Scattered Rain Showers

MIN TEMP: 65 | MAX TEMP: 78

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	8		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10		SHAW E&I
Backfill Area C	T. COLLINS	SITE 57	TECH	10		SHAW E&I
Backfill Area C	S. SMITH	SITE 57	LEAD OP.	10		FSSI
Backfill Area C	E. ABNEY	SITE 57	TECH	10		SHAW E&I
Backfill Area C	T. HURLEY	SITE 57	TECH	10		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					0	
TOTAL PROJECT TRAVEL HRS					**89.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	88.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1784.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1872.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	UNITED RENTALS		FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06	wheel loader w/ 5 cu yd bucket	Off Rent 7-03-06	1 - Pickup truck	
Total Survey Station			1-Pick up Truck			
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Backfill Area C with two loads of stone

Site Restoration - sweep road ways and parking lot area

Prepare for Pre - Final walk Thru

Remove concrete at road way entrance (punch List repair)

Checked E&S features

SITE SUPERINTENDENT - William Simpson - Prepared by Cano Hernandez DATE 7/6/2006

GOVERNMENT INSPECTOR DATE

Punch List Items
From the IH Site 57 Pre-Final Inspection
Conducted 07/06/2006

Contract #N62470-03-D-4402 Task Order No. 25
Interim Removal Action at Site 57 – Building 292 TCE Removal

Attendees:

Cathy Gardner, NAVFAC WASH
Jim Desmond, NAVFAC WASH
Jeff Morris, NAVFAC WASH
Shawn Jorgensen, NSF-IH
Bill Simpson, FSSI
Steve Carriere, Shaw E&I
Cano Hernandez, Shaw E&I
Adam Forshey, Shaw E&I

ITEM NO.	DESCRIPTION	DATE COMPLETED
	Site 57 – Building 292 TCE Contamination Removal	
	Area A	
1	Install CR-6 and compact in lot area next to Building 292	
2	Replace asphalt in the lot	
3	Place topsoil in section between lot and driveway	
4	Seed, fertilize, and mulch topsoil area	
5	Cut asphalt and removed chipped asphalt from Area A driveway	
6	Install CR-6 and compact in Area A driveway	
7	Replace asphalt for the driveway	
8	Replace Smoking Gazebo back in original location and reconnect electrical	
9	Remove high visibility fence from around Monitoring Wells and Building 292 stairway	
10	Remove damaged concrete from storm water culvert and replace with new concrete	
Navy Item 1	6 ft. section of corrugated pipe in the storm water culvert needs replaced. It has rusted through in several areas	
	Area B	
11	Place topsoil	
12	Seed, fertilize, and mulch topsoil area	
13	Remove all high visibility fence around Area B	
Navy Item 2	Install sleeve for valve in Area B (where PVC sleeve is currently located)	
	Area C	
14	Complete backfill and compaction of Area C	
15	Place topsoil	
16	Seed, fertilize, and mulch topsoil area	
17	Install CR-6 and compact	
18	Replace asphalt in roadway and parking area	
19	Remove high visibility fence and road barriers	
	Staging Area	
20	Remove decon pad	
21	Clean debris from area around decon pad	

22	Remove damaged asphalt, place CR-6, compact, and replace with new asphalt	
23	Take down high visibility fence around staging area	
24	Move trailer back to original location	
25	Clean and sweep entire staging area	
	General	
26	Repair tire marked areas along roadway (including seed, fertilize, and mulch)	
27	Perform final sweep of all paved areas	
28	Upon State & ROICC approval, removal all E&S features	

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 31
Date 7/7/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT	
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None	
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐		
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐		
	MATERIALS STORED PROPERLY.	☐	☐		
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐		
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐		
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐		
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐		
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☑	☐	Definable feature/s of work	TESTING PERFORMED & WHO PERFORMED TEST
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	08 Site Restoration Began preparation for backfill of Area C. Moved stone into position and waiting for water to drop. Stone placed at a depth of 4.5 ft bgs. Backfilling will begin tomorrow AM.	None
	WORKMANSHIP IS SATISFACTORY	☑	☐		
	TEST RESULTS ARE ACCEPTABLE.	☐	☐		
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☑	☐		
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐		
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None	TESTING PERFORMED & WHO PERFORMED TEST None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐		
	Performed daily inspection of E&S controls; See onsite inspection form log				

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Paving sub (Beltway Asphalt) onsite to perform visual inspection of the areas to be repaired.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 9.7

See attached Contractor Production Report No. 31

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Florsheg Jr. 7/7/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/07/06 Friday

REPORT NO. 31 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear

MIN TEMP: 68

MAX TEMP: 87

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	5	3	SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	5		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	5		SHAW E&I
Backfill Area C	T. COLLINS	SITE 57	TECH	5		SHAW E&I
Backfill Area C	S. SMITH	SITE 57	LEAD OP.	5		FSSI
Backfill Area C	E. ABNEY	SITE 57	TECH	5		SHAW E&I
Backfill Area C	T. HURLEY	SITE 57	TECH	5		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today					3	
TOTAL PROJECT TRAVEL HRS					**92.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	40.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1872.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1912.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

(1) Ld Top Soil

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	UNITED RENTALS		FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06	wheel loader w/ 5 cu yd bucket	Off Rent 7-03-06	1 - Pickup truck	
Total Survey Station			1-Pick up Truck			
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Backfill Area C

Site Restoration - sweep road ways and parking lot area

Help Paving Contractor perform asphalt take off

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/7/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 32
Date 7/8/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT	
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None	
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐		
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐		
	MATERIALS STORED PROPERLY.	☐	☐		
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐		
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐		
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐		
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐		
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None	TESTING PERFORMED & WHO PERFORMED TEST None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐		
	WORKMANSHIP IS SATISFACTORY	☐	☐		
	TEST RESULTS ARE ACCEPTABLE.	☐	☐		
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐		
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐		
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Completed backfill of Excavation Area C. BTE onsite to perform density testing. All tests returned at greater than 90% compaction. Installed 4 feet of backfill at 8" lifts. Positioned storage trailer back to it's original position (north of telephone pole).	TESTING PERFORMED & WHO PERFORMED TEST Troxler Nuclear Density Testing Bob Taylor Engineering
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐		
	Performed daily inspection of E&S controls; See onsite inspection form log				

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
None

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 9.7

See attached Contractor Production Report No. 32

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J Forshey Jr. 7/8/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/08/06 Saturday

REPORT NO. 32 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear

MIN TEMP: 68

MAX TEMP: 88

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	0		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	6		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	0		SHAW E&I
Backfill Area C	T. COLLINS	SITE 57	TECH	6		SHAW E&I
Backfill Area C	S. SMITH	SITE 57	LEAD OP.	6		FSSI
Backfill Area C	E. ABNEY	SITE 57	TECH	6		SHAW E&I
Backfill Area C	T. HURLEY	SITE 57	TECH	0		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					92.5	

JOB SAFETY		
	JOB SAFETY MEETING HELD THIS DATE?	YES
	ANY LOST TIME ACCIDENTS THIS DATE?	NO
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?		NO
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?		NO
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	24.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1912.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1936.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	UNITED RENTALS		FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06	wheel loader w/ 5 cu yd bucket	Off Rent 7-03-06	1 - Pickup truck	
Total Survey Station			1-Pick up Truck			
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Complete backfill Area C - placed fill material in 8" lifts and compacted fill material with a vibratory plate tamper

Bob Taylor Engineering on site to check density - all test above 90%

Cleaned roads and reinstalled barricades and Orange fencing around excavated area

Secure site and checked silt fence before leaving work site.

Relocated Small Storage Trailer

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/8/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 33
Date 7/10/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Saw cut asphalt and cleaned areas for asphalt subcontractor. Installed CR-6 in Area A and compacted with a plate compactor. CR-6 geotechnical not required because it is the same as what was used at Site 42 (per J. Morris at pre-final). Graded subbase for proper water runoff.
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST: None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS): None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST): None

REMARKS:
Received rolloff for remainder of debris disposal and T&D.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 9.7

See attached Contractor Production Report No. 33

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Frosheg, Jr 7/10/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/10/06 Monday

REPORT NO. 33 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Haze

MIN TEMP: 68 | MAX TEMP: 88

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	8		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	9		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	0		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	6		SHAW E&I
Site Restoration Area A	T. COLLINS	SITE 57	TECH	8		SHAW E&I
Site Restoration Area A	S. SMITH	SITE 57	LEAD OP.	8		FSSI
Site Restoration Area A	E. ABNEY	SITE 57	TECH	8		SHAW E&I
Site Restoration Area A	T. HURLEY	SITE 57	TECH	8		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					**92.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	55.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1936.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	1991.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

United Rental
Walk Behind Saw
Laser,Tripod,and pole

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	UNITED RENTALS		FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06	wheel loader w/ 5 cu yd bucket	Off Rent 7-03-06	1 - Pickup truck	
Total Survey Station			1-Pick up Truck			
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Saw cut asphalt as needed for asphalt repair in Area A and stockpiled for off site removal
Grade subgrade in Area A
Install CR6 in Area A and compacted with plate tamper
Received Roll-Off for Final Debris clean up
Set up laser and check elevations for final grade

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/10/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 34
Date 7/11/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT	
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None	
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐		
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐		
	MATERIALS STORED PROPERLY.	☐	☐		
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐		
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐		
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐		
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐		
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None	TESTING PERFORMED & WHO PERFORMED TEST None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐		
	WORKMANSHIP IS SATISFACTORY	☐	☐		
	TEST RESULTS ARE ACCEPTABLE.	☐	☐		
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐		
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐		
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Continued with site restoration activities. Saw cut damaged areas of asphalt in Material Storage pad area (approx 1500 sq. ft.). Installed CR-6 (approx 6") at 3" lifts and compacted for Area A drive way asphalt replacement. Formed and poured concrete for damaged culvert. Installed 6" of topsoil in Area A. Checked grade in Area A	TESTING PERFORMED & WHO PERFORMED TEST None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐		
	Performed daily inspection of E&S controls; See onsite inspection form log				

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Checked grade with laser (Cano Hernandez)

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 9.7

See attached Contractor Production Report No. 34

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Robert J. Fosha, Jr 7/11/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/11/06 Tuesday

REPORT NO. 34 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Clear

MIN TEMP: 69

MAX TEMP: 90

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	6		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	12		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10		SHAW E&I
Site Restoration Area A	T. COLLINS	SITE 57	TECH	12		SHAW E&I
Site Restoration Area A	S. SMITH	SITE 57	LEAD OP.	12		FSSI
Site Restoration Area A	E. ABNEY	SITE 57	TECH	12		SHAW E&I
Site Restoration Area A	T. HURLEY	SITE 57	TECH	12		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					**92.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	86.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1997.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	2083.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT \ MATERIALS RECEIVED TODAY

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	UNITED RENTALS		FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off rent 6-1-06	wheel loader w/ 5 cu yd bucket	Off Rent 7-03-06	1 - Pickup truck	
Total Survey Station			1-Pick up Truck			
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Saw cut asphalt as needed for asphalt repair in Area B (Material Handling - Parking Lot)

Grade subgrade in Area A - (Roadway section)

Install CR6 in Area A (Roadway section) and compacted with plate tamper

Remove damaged concrete from storm water culvert,set forms, install rebar and replaced with new concrete

Set up laser and check elevations for final grade

Area A - Graded subgrade area between roadway and parking area in front of bldg. 292 and prepare for Topsoil and checked elevations

Load roll off with debris

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/11/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 35
Date 7/12/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT	
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None	
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐		
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐		
	MATERIALS STORED PROPERLY.	☐	☐		
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐		
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐		
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐		
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐		
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None	TESTING PERFORMED & WHO PERFORMED TEST None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐		
	WORKMANSHIP IS SATISFACTORY	☐	☐		
	TEST RESULTS ARE ACCEPTABLE.	☐	☐		
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐		
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐		
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Continued site restoration activities. Completed installation of CR-6 in Area A. Installed approx 6" of CR-6 in areas for asphalt at 3" lifts and compacted 05 Field Sampling and Offsite Analysis Took samples from decon water for offsite analysis	TESTING PERFORMED & WHO PERFORMED TEST Sampled Decon Water Performed by Tim Collins
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐		
	Performed daily inspection of E&S controls; See onsite inspection form log				

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Checked grade with laser (Cano Hernandez)

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 9.7

See attached Contractor Production Report No. 35

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Fraeshey Jr 7/12/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/12/06 Wednesday

REPORT NO. 35 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Haze

MIN TEMP: 76 | MAX TEMP: 91

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	1		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	12		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10		SHAW E&I
Site Restoration Area A	T. COLLINS	SITE 57	TECH	12		SHAW E&I
Site Restoration Area A	S. SMITH	SITE 57	LEAD OP.	12		FSSI
Site Restoration Area A	E. ABNEY	SITE 57	TECH	12		SHAW E&I
Site Restoration Area A	T. HURLEY	SITE 57	TECH	12		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					**92.5**	

JOB SAFETY		
JOB SAFETY	JOB SAFETY MEETING HELD THIS DATE?	YES
	ANY LOST TIME ACCIDENTS THIS DATE?	NO
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?		NO
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?		NO
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	91.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2083.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	2174.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

Farm Services

1-Id Topsoil

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	UNITED RENTALS		FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off'rent 6-1-06	wheel loader w/ 5 cu yd bucket	Off'Rent 7-03-06	1 - Pickup truck	
Total Survey Station			1-Pick up Truck			
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Complete Grading subgrade in Area A - (Roadway section)

Complete Installation of CR6 in Area A (Roadway section) and compacted with plate tamper

Removed forms from concrete culvert (corrugated pipe)

Set up laser and check elevations for final grade

Grab decon water samples and ship to Lab

Load roll off with debris

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/12/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 36
Date 7/13/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Removed damaged asphalt (previously saw cut) from Materal Storage Pad area and loaded in rolloff. Placed CR-6 in MSP area and compacted (same as before). Completed 6" topsoil installation at all three areas. Completed seeding and mulching of all three areas with specified seeding from plan.
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Overnight rainfall
Checked grade with laser (Cano Hernandez)

Inches of rain recorded at site trailer: 0.5
Cumulative inches of rain for project: 10.2

See attached Contractor Production Report No. 33

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Forchey, Jr. 7/13/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/13/06 Thursday

REPORT NO. 36 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Light showers

MIN TEMP: 76 | MAX TEMP: 88

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	10		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	0		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	12		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10		SHAW E&I
Site Restoration	T. COLLINS	SITE 57	TECH	12		SHAW E&I
Site Restoration	S. SMITH	SITE 57	LEAD OP.	12		FSSI
Site Restoration	E. ABNEY	SITE 57	TECH	12		SHAW E&I
Site Restoration	T. HURLEY	SITE 57	TECH	12		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					**92.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	90.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2174.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	2264.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

Farm Services

1-ld Topsoil

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	UNITED RENTALS		FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator	Trencher -off'rent 6-1-06	wheel loader w/ 5 cu yd bucket	Off'Rent 7-03-06	1 - Pickup truck	
Total Survey Station			1-Pick up Truck			
Photovac 2020 (H&S)				WASTE MANAGEMENT	BURCH OIL	
PDR-1000 (H&S)				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
Gilibrator Kit (H&S)						1 - Connex box

REMARKS

Remove asphalt on MH pad side and stock pile for removal

Grade same area with CR6 and compact with plate tamper

Complete Seed and Straw at Area A

Set up laser and check elevations for final grade

Final grading on road way at Area A and compact with plate tamper

Area C Grade,seed,and straw distrubed areas

Continue to Load roll off with debris

Note; 1/2" of rain last night

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/13/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/14/06 Friday

REPORT NO. 37 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Mostly Cloudy

MIN TEMP: 72 | MAX TEMP: 85

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	5		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	9		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	11		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10		SHAW E&I
Site Restoration	T. COLLINS	SITE 57	TECH	11		SHAW E&I
Site Restoration	S. SMITH	SITE 57	LEAD OP.	11		FSSI
Site Restoration	E. ABNEY	SITE 57	TECH	11		SHAW E&I
Site Restoration	T. HURLEY	SITE 57	TECH	11		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					**92.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	89.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2264.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	2353.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

Farm Services

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	UNITED RENTALS		FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator				1 - Pickup truck	
Total Survey Station			1-Pick up Truck			
				WASTE MANAGEMENT	BURCH OIL	
				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
						1 - Connex box

REMARKS

Load out asphalt on dump truck (manifest)

Electrician on site disconnect electricity from Gazebo

Move Gazebo and place in original location. Reconnected electrical.

Reroute orange fence around Gazebo area

Clean roads with sweeper

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/14/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 37
Date 7/14/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Loaded dump truck with asphalt debris from staged area. Obtained waste manifest for asphalt. Disconnected smoking gazebo electrical and moved gazebo back to its original location in Area A. Reconnected electrical for smoking gazebo. Adjusted High Vis fence to allow for access to the smoking gazebo.
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
None

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 10.2

See attached Contractor Production Report No. 37

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Forsley, Jr. 7/14/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 38
Date 7/17/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT	
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None	
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐		
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐		
	MATERIALS STORED PROPERLY.	☐	☐		
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐		
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐		
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐		
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐		
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None	TESTING PERFORMED & WHO PERFORMED TEST None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐		
	WORKMANSHIP IS SATISFACTORY	☐	☐		
	TEST RESULTS ARE ACCEPTABLE.	☐	☐		
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐		
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐		
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Continued with site restoration and completion of punch list items (see attached punch list). Performed site cleaning and housekeeping.	TESTING PERFORMED & WHO PERFORMED TEST None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐		
	Performed daily inspection of E&S controls; See onsite inspection form log				

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
None

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 10.2

See attached Contractor Production Report No. 38

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Foshey, Jr 7/17/2006
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/17/06 Monday

REPORT NO. 38 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Sunny and Hot

MIN TEMP: 68 | MAX TEMP: 96

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	9		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10		SHAW E&I
Site Restoration	T. COLLINS	SITE 57	TECH	4		SHAW E&I
Site Restoration	S. SMITH	SITE 57	LEAD OP.	8		FSSI
Site Restoration	E. ABNEY	SITE 57	TECH	8		SHAW E&I
Site Restoration	T. HURLEY	SITE 57	TECH	0		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS				49	**92.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE			
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2353.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	2402.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	UNITED RENTALS		FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator				1 - Pickup truck	
Total Survey Station			1-Pick up Truck			
				WASTE MANAGEMENT	BURCH OIL	
				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
						1 - Connex box

REMARKS

Clean roads with sweeper

Site Restoration

No work Sat 7-16 and Sun 7-16-06

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/17/2006

GOVERNMENT INSPECTOR DATE

Punch List Items
From the IH Site 57 Pre-Final Inspection
Conducted 07/06/2006

Contract #N62470-03-D-4402 Task Order No. 25
Interim Removal Action at Site 57 – Building 292 TCE Removal

Attendees:

Cathy Gardner, NAVFAC WASH
Jim Desmond, NAVFAC WASH
Jeff Morris, NAVFAC WASH
Shawn Jorgensen, NSF-IH
Bill Simpson, FSSI
Steve Carriere, Shaw E&I
Cano Hernandez, Shaw E&I
Adam Forshey, Shaw E&I

ITEM NO.	DESCRIPTION	DATE COMPLETED
	Site 57 – Building 292 TCE Contamination Removal	
	Area A	
1	Install CR-6 and compact in lot area next to Building 292	7-13-06
2	Replace asphalt in the lot	
3	Place topsoil in section between lot and driveway	7-13-06
4	Seed, fertilize, and mulch topsoil area	7-13-06
5	Cut asphalt and removed chipped asphalt from Area A driveway	7-10-06
6	Install CR-6 and compact in Area A driveway	7-11-06
7	Replace asphalt for the driveway	7-
8	Replace Smoking Gazebo back in original location and reconnect electrical	7-18-06
9	Remove high visibility fence from around Monitoring Wells and Building 292 stairway	7-14-06
10	Remove damaged concrete from storm water culvert and replace with new concrete	7-11-06
Navy Item 1	6 ft. section of corrugated pipe in the storm water culvert needs replaced. It has rusted through in several areas	
	Area B	
11	Place topsoil	7-11-06
12	Seed, fertilize, and mulch topsoil area	7-11-06
13	Remove all high visibility fence around Area B	7-18-06
Navy Item 2	Install sleeve for valve in Area B (where PVC sleeve is currently located)	
	Area C	
14	Complete backfill and compaction of Area C	7-08-06
15	Place topsoil	7-13-06
16	Seed, fertilize, and mulch topsoil area	7-13-06
17	Install CR-6 and compact	7-11-06
18	Replace asphalt in roadway and parking area	7-12-06
19	Remove high visibility fence and road barriers	
	Staging Area	
20	Remove decon pad	7-11-06
21	Clean debris from area around decon pad	7-11-06

.5" Rain

7-13-06 7-14-06

22	Remove damaged asphalt, place CR-6, compact, and replace with new asphalt	
23	Take down high visibility fence around staging area	7-
24	Move trailer back to original location	7-08-06
25	Clean and sweep entire staging area	7-08-06
	General	
26	Repair tire marked areas along roadway (including seed, fertilize, and mulch)	7-14-06
27	Perform final sweep of all paved areas	7-14-06
28	Upon State & ROICC approval, removal all E&S features	

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 39
Date 7/18/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Continued with site restoration. Preped areas for asphalt placement (tomorrow). Dry deconed the CAT 320 excavator.
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Weather is hot and dry. No rain is forecast for tomorrow. Asphalt paving anticipated to continue as scheduled.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 10.2

See attached Contractor Production Report No. 39

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Foosley Jr 7/18/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

423
GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/18/06 Tuesday

REPORT NO. 39 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Sunny and Hot

MIN TEMP: 68 | MAX TEMP: 93

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	0		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	10		SHAW E&I
Site Restoration	T. COLLINS	SITE 57	TECH	8		SHAW E&I
Site Restoration	S. SMITH	SITE 57	LEAD OP.	8		FSSI
Site Restoration	E. ABNEY	SITE 57	TECH	8		SHAW E&I
Site Restoration	T. HURLEY	SITE 57	TECH	0		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					**92.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	44.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2402.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	2446.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT ON SITE

SHAW EQUIP: 2-Chevy pkup trk; Total Survey Station

SHAW EQUIP (continued): 1 - 320 Excavator

SUNBELT

UNITED RENTALS: 1-Pick up Truck

FSSI: 1 - Pickup truck

William Scotsman

WASTE MANAGEMENT: 1 - 6yd Dumpster

BURCH OIL: 1 - 500 gal. fuel cells

Allied Rentals: 1 - Connex box

REMARKS

Clean roads with sweeper
Site Restoration
Decon 320 Cat Excavator
Swept area for paving

No Rain
Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/18/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 40
Date 7/19/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Continued with site restoration by replacing asphalt in the designated areas. Paving performed by R.E. Sheehy (301-855-9040). Asphalt was placed in two lifts on top of the previously installed CR-6 sub base.
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
None

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 10.2

See attached Contractor Production Report No. 40

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Forshey Jr. 7/19/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/19/06 Wednesday

REPORT NO. 40 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Hot

MIN TEMP: 69 | MAX TEMP: 91

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	0		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	8		SHAW E&I
Site Restoration	T. COLLINS	SITE 57	TECH	9		SHAW E&I
Site Restoration	S. SMITH	SITE 57	LEAD OP.	9		FSSI
Site Restoration	E. ABNEY	SITE 57	TECH	9		SHAW E&I
Site Restoration	T. HURLEY	SITE 57	TECH	0		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					**92.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE?	NO	
(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)		

TOTAL WORK HOURS ON THIS DATE	45.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2446.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	2491.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT ON SITE

SHAW EQUIP: 2-Chevy pkup trk; Total Survey Station

SHAW EQUIP (continued): 1 - 320 Excavator

SUNBELT

UNITED RENTALS: 1-Pick up Truck

WASTE MANAGEMENT: 1 - 6yd Dumpster

FSSI: 1 - Pickup truck

BURCH OIL: 1 - 500 gal. fuel cells

William Scotsman

Allied Rentals: 1 - Connex box

REMARKS

Site Restoration

Clean and inventory con-nex box

Asphalt was installed in all areas that were distrubed (Area A in front of Bldg 292), Roadway along corrugated pipe, parking lot where the Material Handling pad was installed, Area C along the road way. (Paving performed by R.E. Sheehy)

Photos for documentation were taken of asphalt installation.

No Rain

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/19/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 41
Date 7/20/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Continued with site restoration and cleanup. Relocated 2 Pipe Racks back to original location in Handling Pad area.
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)	REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None	None

REMARKS:
Loader was moved by someone on base today. Located loader approx. 1/2 mile away from Site 57.

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 10.2

See attached Contractor Production Report No. 41

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Horsley, Jr. 7/20/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/20/06 Thursday

REPORT NO. 41 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Hot

MIN TEMP: 69

MAX TEMP: 91

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	9		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	8		SHAW E&I
Site Restoration	T. COLLINS	SITE 57	TECH	10		SHAW E&I
Site Restoration	S. SMITH	SITE 57	LEAD OP.	10		FSSI
Site Restoration	E. ABNEY	SITE 57	TECH	10		SHAW E&I
Site Restoration	T. HURLEY	SITE 57	TECH	0		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					**92.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	67.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2491.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	2558.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	UNITED RENTALS		FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator				1 - Pickup truck	
Total Survey Station			1-Pick up Truck			
				WASTE MANAGEMENT	BURCH OIL	
				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
						1 - Connex box

REMARKS

Site Restoration

Clean and inventory con-nex box

Placed two pipe racks in place (original spot)

Photos for documentation were taken

Notified by email Jim Desmond - RIOCC by Email of Shaw's Volvo loader was moved from the site with out permission, and found 1/2 mile away from the site.

will follow up with Jim Desmond - RIOCC

No Rain

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/20/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 42
Date 7/21/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT	
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None	
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐		
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐		
	MATERIALS STORED PROPERLY.	☐	☐		
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐		
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐		
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐		
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐		
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None	TESTING PERFORMED & WHO PERFORMED TEST None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐		
	WORKMANSHIP IS SATISFACTORY	☐	☐		
	TEST RESULTS ARE ACCEPTABLE.	☐	☐		
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐		
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐		
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Continued site restoration. Relocated all equipment to one area of the site to allow for site inspection and easy access for rental companies. All equipment is off rent.	TESTING PERFORMED & WHO PERFORMED TEST None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐		
	Performed daily inspection of E&S controls; See onsite inspection form log				

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Some late evening rainfall
Continued write up and investigation of moved loader. 6 additional hours and 1/4 tank of gas have been placed/used on the equipment.

Inches of rain recorded at site trailer: 0.3
Cumulative inches of rain for project: 10.5

See attached Contractor Production Report No. 42

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Forshey, Jr. 7/21/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE:	07/21/06	Friday
REPORT NO.	42	page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Hazey

MIN TEMP: 71 | MAX TEMP: 91

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	6.5		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	0		SHAW E&I
Site Restoration	T. COLLINS	SITE 57	TECH	0		SHAW E&I
Site Restoration	S. SMITH	SITE 57	LEAD OP.	0		FSSI
Site Restoration	E. ABNEY	SITE 57	TECH	10		SHAW E&I
Site Restoration	T. HURLEY	SITE 57	TECH	0		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					**92.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	36.5		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2558.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	2595.0		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	UNITED RENTALS		FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator				1 - Pickup truck	
Total Survey Station			1-Pick up Truck			
				WASTE MANAGEMENT	BURCH OIL	
				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
						1 - Connex box

REMARKS

Site Restoration

Filed a Report with the Base Police about the missing loader.

Jim Desmond - RIOCC and Cano Hernandez Shaw E&I went to site to look at loader to make sure no damage and visit site where loader was foun

All rental equipment is off rent as of today

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/21/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 43
Date 7/22/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☑	☐	Definable feature/s of work 08 Site Restoration Checked E&S features after rainfall. Cleaned site and preped for final site walk.
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☑	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Heavy overnight rainfall.

Inches of rain recorded at site trailer: 1.5
Cumulative inches of rain for project: 12.0

See attached Contractor Production Report No. 43

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Forshey, Jr. 7/22/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/22/06 Saturday

REPORT NO. 43 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Mostly Cloudy

MIN TEMP: 65

MAX TEMP: 82

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	0		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	0		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	5		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	0		SHAW E&I
Site Restoration	T. COLLINS	SITE 57	TECH	0		SHAW E&I
Site Restoration	S. SMITH	SITE 57	LEAD OP.	0		FSSI
Site Restoration	E. ABNEY	SITE 57	TECH	5		SHAW E&I
Site Restoration	T. HURLEY	SITE 57	TECH	0		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					92.5	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	10.0		
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2595.5		
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	2605.5		

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT ON SITE

SHAW EQUIP: 2-Chevy pkup trk; Total Survey Station

SHAW EQUIP (continued): 1 - 320 Excavator

SUNBELT

UNITED RENTALS: 1-Pick up Truck

WASTE MANAGEMENT: 1 - 6yd Dumpster

FSSI: 1 - Pickup truck

BURCH OIL: 1 - 500 gal. fuel cells

William Scotsman

Allied Rentals: 1 - Connex box

REMARKS

Site Restoration - prepare for final walk thru

All work is complete and ready for Final Walk Thru.

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/22/2006

GOVERNMENT INSPECTOR DATE

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 44
Date 7/24/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work None
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None

TESTING PERFORMED & WHO PERFORMED TEST
None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
Performed Final Site inspection and generated new punch list sheet (see attached punch list).

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 12.0

See attached Contractor Production Report No. 44

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam Flowley, Jr. 7/24/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/24/06 Monday

REPORT NO. 44 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Hot partly cloudy

MIN TEMP: 66 | MAX TEMP: 84

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	0		SHAW E&I
Site Restoration	T. COLLINS	SITE 57	TECH	0		SHAW E&I
Site Restoration	S. SMITH	SITE 57	LEAD OP.	0		FSSI
Site Restoration	E. ABNEY	SITE 57	TECH	0		SHAW E&I
Site Restoration	T. HURLEY	SITE 57	TECH	0		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					**92.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	30.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2595.5
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	2625.5

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

EQUIPMENT ON SITE

SHAW EQUIP	SHAW EQUIP (continued)	SUNBELT	UNITED RENTALS		FSSI	William Scotsman
2-Chevy pkup trk	1 - 320 Excavator				1 - Pickup truck	
Total Survey Station			1-Pick up Truck			
				WASTE MANAGEMENT	BURCH OIL	
				1 - 6yd Dumpster	1 - 500 gal. fuel cells	Allied Rentals
						1 - Connex box

REMARKS

Final Walk Thru @ 1300

No Rain

Checked E&S features

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/24/2006

GOVERNMENT INSPECTOR DATE

Punch List Items
From the IH Site 57 Final Inspection
Conducted 07/24/2006

Contract #N62470-03-D-4402 Task Order No. 25
Interim Removal Action at Site 57 – Building 292 TCE Removal

Attendees:

Cathy Gardner, NAVFAC WASH
Jim Desmond, NAVFAC WASH
Joe Rail, NAVFAC WASH
Shawn Jorgensen, NSF-IH
Bill Simpson, FSSI
Steve Carriere, Shaw E&I
Cano Hernandez, Shaw E&I
Adam Forshey, Shaw E&I

ITEM NO.	DESCRIPTION	DATE COMPLETED
	Site 57 – Building 292 TCE Contamination Removal	
1	Dump decon water out on ground (per S. Jorgensen).	
2	Place stone in bare area between Thomas Rd. and the driveway road just south of the Smoking Gazebo.	
3	Remove topsoil from Area C and replace with 2"-3" stone back to existing stone.	
4	Place topsoil from Area C in the hole southeast of excavation Area B (use tape to mark and identify existing conduit before backfilling.	
5	Seed, fertilize, and mulch topsoil placed in the hole Southeast of excavation Area B.	

CONTRACTOR QUALITY CONTROL REPORT

Shaw Environmental, Inc. CONTRACT:N62470-03-D-4402 T.O. 025

Report No. 45
Date 7/25/2006

PHASE	(BLANK - NOT APPLICABLE)	YES	NO	IDENTIFY DEFINABLE FEATURE OF WORK, SPECIFICATION SECTION, LOCATION AND LIST PERSONNEL PRESENT
PREPARATORY	PLANS AND SPECS HAVE BEEN REVIEWED	☐	☐	Definable feature/s of work None
	THE SUBMITTALS HAVE BEEN APPROVED.	☐	☐	
	MATERIALS COMPLY WITH APPROVED SUBMITTALS	☐	☐	
	MATERIALS STORED PROPERLY.	☐	☐	
	PRELIMINARY WORK WAS DONE CORRECTLY.	☐	☐	
	TESTING PLAN HAS BEEN REVIEWED.	☐	☐	
	WORK METHOD AND SCHEDULE DISCUSSED.	☐	☐	
	JOB SAFETY / HAZARD ANALYSIS ADDRESSED	☐	☐	
INITIAL	PRELIMINARY WORK WAS DONE CORRECTLY	☐	☐	Definable feature/s of work None
	SAMPLE HAS BEEN PREPARED/APPROVED	☐	☐	
	WORKMANSHIP IS SATISFACTORY	☐	☐	
	TEST RESULTS ARE ACCEPTABLE.	☐	☐	
	WORK IS IN COMPLIANCE WITH THE CONTRACT.	☐	☐	
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	
FOLLOW-UP	WORK COMPLIES WITH CONTRACT AS APPROVED INITIAL PHASE	☐	☐	Definable feature/s of work 08 Site Restoration Completed all items from the Final Site Walk punch list. Removed topsoil from Area C and placed in hole near Area B. Placed 2" to 3" stone in Area C to prevent erosion. Also placed stone in corner between Thomas Rd. and access rd. south of the smoking gazebo. Emptied decon water out per S. Jorgensen.
	WORK COMPLIES WITH SAFETY REQUIREMENTS	☐	☐	

TESTING PERFORMED & WHO PERFORMED TEST
None
None

Performed daily inspection of E&S controls; See onsite inspection form log

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)
None

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)
None

REMARKS:
None

Inches of rain recorded at site trailer: 0.0
Cumulative inches of rain for project: 12.0

See attached Contractor Production Report No. 45

On behalf of the contractor, I certify that this report is completed and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Adam J. Forsley Jr 7/25/06
QC MANAGER DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07/25/06 Tuesday

REPORT NO. 45 page 1 of 1

PROJECT # 120359 | TITLE AND LOCATION: Site 57, INDIAN HEAD, MD

CONTRACTOR: FSSI / SHAW

SITE SUPERINTENDENT: William Simpson

WEATHER/ WEATHER EFFECTS: Hot partly cloudy

MIN TEMP: 66 | MAX TEMP: 82

WORK PERFORMED TODAY

WORK LOCATION AND DESCRIPTION	NAME	WORK AREA	TRADE	WORK HRS	TRAV HRS	EMPLOYER
Project manager	S. CARRIERE	SITE TRAILER	PROJECT MGR	10		SHAW E&I
Management and procurement of project	W. SIMPSON	SITE TRAILER	SITE MGR	0		FSSI
Field QC manager and engineer for project.	A. FORSHEY	SITE TRAILER	FLD ENG/QC	10		SHAW E&I
Health and Safety officer	J. WRIGHT	SITE TRAILER	H & S	0		SHAW E&I
Supervises all tasks on site	C. HERNANDEZ	SITE 57	SITE SUPERVISOR	10		SHAW E&I
Project accountant, procurement and cost tracking	K. PHILLIPS	SITE TRAILER	PBA	0		SHAW E&I
Site Restoration	T. COLLINS	SITE 57	TECH	0		SHAW E&I
Site Restoration	S. SMITH	SITE 57	LEAD OP.	0		FSSI
Site Restoration	E. ABNEY	SITE 57	TECH	0		SHAW E&I
Site Restoration	T. HURLEY	SITE 57	TECH	0		SHAW E&I
Travel Hours *=TRAVEL WEEKEND for today						
TOTAL PROJECT TRAVEL HRS					**92.5**	

JOB SAFETY		
JOB SAFETY MEETING HELD THIS DATE?	YES	
ANY LOST TIME ACCIDENTS THIS DATE?	NO	
TRENCHING/SCAFFOLDING/HV ELECTRICAL/HIGH WORK DONE?	NO	
WERE THERE ANY NEAR MISS ACCIDENTS ON THIS DATE? *(ATTACH REPORTS OR PROPOSED ACTIONS AS NECESSARY)*	NO	

TOTAL WORK HOURS ON THIS DATE	30.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2625.5
TOTAL WORK HOURS THIS PROJECT FROM SUPERINTENDENT	2655.5

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED

Daily Safety Meeting, and safety observer program in affect.

Aggtrans

1-ld 2" Stone

EQUIPMENT ON SITE

SHAW EQUIP: 2-Chevy pkup trk; Total Survey Station

SHAW EQUIP (continued): 1 - 320 Excavator

SUNBELT

UNITED RENTALS: 1-Pick up Truck

FSSI: 1 - Pickup truck

William Scotsman

WASTE MANAGEMENT: 1 - 6yd Dumpster

BURCH OIL: 1 - 500 gal. fuel cells

Allied Rentals: 1 - Connex box

REMARKS

Re-do punch list items

Dump Decon water

Place stone in bare area between Thomas Rd. and the driveway road just south of the Smoking gazebo

Remove Topsoil from Area C and replace with 2" stone back to the existing stone

Place topsoil from Area C in the hole southeast of excavation B

Area B - Installed marker Tape - One Ft above conduit

Seed, fertilize, and mulch topsoil placed in the hole Southeast of excavation at area B

Vendors picked up sweeper and skid steer loader

No Rain

Checked E&S features, fixed damage to SF east of Area B

SITE SUPERINTENDENT - William Simpsom - Prepared by Cano Hernandez DATE 7/25/2006

GOVERNMENT INSPECTOR DATE

SECTION 5.0
STINNETT'S GRAVEL
DEPOSIT TICKETS

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET
39556

Date 6/30/06
Customer Shaw
Cust. No.
Job NOS Indian Head
Load No. 32
Tons
Cubic Yards
Trucker Name J Jordan
Trucker No.
Type of Vehicle: ☐ S/A ☑ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☑ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher JS

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET
39555

Date 6/30/06
Customer Shaw
Cust. No.
Job NOS Indian Head
Load No. 31
Tons
Cubic Yards
Trucker Name Smith
Trucker No.
Type of Vehicle: ☐ S/A ☑ T/A ☐ Trailer

MATERIAL

☑ BANK RUN
☐ TOP SOIL
☑ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher JS

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

Site 57 Backfill material

Paid $7,500
32 loads @ $150 = $(4,800)

Amount Owed $2,700
to Shaw

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39554

Date 11/30/06
Customer Shaw
Cust. No.
Job A.O.S. Indian Head
Load No. 30
Tons
Cubic Yards
Trucker Name Dump
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39552

Date 11/30/06
Customer Shaw
Cust. No.
Job A.O.S. Indian Head
Load No. 29
Tons
Cubic Yards
Trucker Name Cones
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39548

Date 11/30/06
Customer Shaw
Cust. No.
Job A.O.S. Indian Head
Load No. 28
Tons
Cubic Yards
Trucker Name
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39547

Date 6/30/06
Customer Shaw
Cust. No.
Job NOS
Load No. 27
Tons
Cubic Yards
Trucker Name Smith
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☒ BANK RUN
☐ TOP SOIL
☐ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39546

Date 6/30/06
Customer Shaw
Cust. No.
Job NOS Indian Head
Load No. 26
Tons
Cubic Yards
Trucker Name DM P.
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39544

Date 6/30/06
Customer Shaw
Cust. No.
Job NOS Indian Head
Load No. 25
Tons
Cubic Yards
Trucker Name Carlos
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☒ BANK RUN
☐ TOP SOIL
☐ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL **LOAD TICKET**

7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

39542

Date 6/30/06

Customer Shaw

Cust. No. 23

Job N. OS Indian Head

Load No. 20

Tons

Cubic Yards

Trucker Name Smith

Trucker No.

Type of Vehicle: ☐ S/A ☑ T/A ☐ Tra

MATERIAL

☑ BANK RUN

☐ TOP SOIL

☐ FILL MATERIAL

☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature

Received by

STINNETT'S GRAVEL **LOAD TICKET**

7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

39541

Date 6/30/06

Customer Shaw

Cust. No.

Job N. OS Indian Head

Load No. 22

Tons

Cubic Yards

Trucker Name DMP

Trucker No.

Type of Vehicle: ☐ S/A ☑ T/A ☐ Trailer

MATERIAL

☐ BANK RUN

☐ TOP SOIL

☑ FILL MATERIAL

☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature

Received by

STINNETT'S GRAVEL **LOAD TICKET**

7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

39543

Date 6/30/06

Customer Shaw

Cust. No.

Job N. OS Indian Head

Load No. 24

Tons

Cubic Yards

Trucker Name T. Jordan

Trucker No.

Type of Vehicle: ☐ S/A ☑ T/A ☐ Trailer

MATERIAL

☑ BANK RUN

☐ TOP SOIL

☐ FILL MATERIAL

☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature

Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL **LOAD TICKET**

7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

39535

Date 6/30/06

Customer Shaw Cust. No.

Job N.O.S Indian Head Load No. 20

Tons Cubic Yards

Trucker Name J. Jordan

Trucker No.

Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN COMMENTS:

☐ TOP SOIL

☒ FILL MATERIAL

☐ OTHER

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature

Received by

White-Original Yellow-Office Pink-Customer Gold-Customer

STINNETT'S GRAVEL **LOAD TICKET**

7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

39534

Date 6/30/06

Customer Shaw Cust. No.

Job N.O.S Indian Head Load No. 17

Tons Cubic Yards

Trucker Name DMP

Trucker No.

Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN COMMENTS:

☐ TOP SOIL

☒ FILL MATERIAL

☐ OTHER

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature

Received by

White-Original Yellow-Office Pink-Customer Gold-Customer

STINNETT'S GRAVEL **LOAD TICKET**

7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

39540

Date 6/30/06

Customer Shaw Cust. No.

Job N.O.S Indian Head Load No. 21

Tons Cubic Yards Clones

Trucker Name

Trucker No.

Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN COMMENTS:

☐ TOP SOIL

☒ FILL MATERIAL

☐ OTHER

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature

Received by

White-Original Yellow-Office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39533

Date 6/30/06
Customer Shaw
Cust. No.
Job N.O.S
Load No. 18
Tons
Cubic Yards
Trucker Name Clenos
Trucker No.
Type of Vehicle: ☐ S/A ☑ T/A ☐ Trailer

MATERIAL

☑ BANK RUN
☐ TOP SOIL
☐ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Ori

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39528

Date 6/30/06
Customer Shaw
Cust. No.
Job N.O.S Indian Head
Load No. 17
Tons
Cubic Yards
Trucker Name Smith
Trucker No.
Type of Vehicle: ☐ S/A ☑ T/A ☐ Trailer

MATERIAL

☑ BANK RUN
☐ TOP SOIL
☐ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39523

Date 6/30/06
Customer Shaw
Cust. No.
Job N.O.S Indian Head
Load No. 16
Tons
Cubic Yards
Trucker Name Jordan
Trucker No.
Type of Vehicle: ☐ S/A ☑ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☑ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39520

Date 6/30/06
Customer Shaw
Cust. No.
Job N.O.S Indian Head
Load No. 14
Tons
Cubic Yards
Trucker Name C Jones
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by Steve Smith

White-C

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39519

Date 6/30/06
Customer Shaw
Cust. No.
Job N.O.S Indian Head
Load No. 13
Tons
Cubic Yards
Trucker Name Smith
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39521

Date 6/30/06
Customer Shaw
Cust. No.
Job N.O.S Indian Head
Load No. 15
Tons
Cubic Yards DMP
Trucker Name
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☒ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by Steve Smith

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39511

Date 6/30/06
Customer Shaw
Cust. No.
Job N.O.S Indian Head
Load No. 9
Tons
Cubic Yards
Trucker Name Sm. Tg
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher RS

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39515

Date 6/30/06
Customer Shaw
Cust. No.
Job N.O.S Indian Head
Load No. 11
Tons
Cubic Yards
Trucker Name DMP
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher RS

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39518

Date 6/30/06
Customer Shaw
Cust. No.
Job N.O.S Indian Head
Load No. 12
Tons
Cubic Yards
Trucker Name J. Jordan
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☒ BANK RUN
☐ TOP SOIL
☐ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher RS

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39508

Date 6/30/06
Customer Shaw
Cust. No.
Job NCS Indian Head
Load No. 2
Tons
Cubic Yards
Trucker Name J. London
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39507

Date 6/30/06
Customer Shaw
Cust. No.
Job NCS Indian Head
Load No. 7
Tons
Cubic Yards
Trucker Name Dump
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39513

Date 6/30/06
Customer Shaw
Cust. No.
Job NCS Indian Head
Load No. 10
Tons
Cubic Yards
Trucker Name Jones
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

Gold-Customer
Pink-Customer
Yellow-office
e-Original

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39505

Date 6/30/06
Customer Shaw
Cust. No.
Job N. O S. Indian Head
Load No. 5
Tons
Cubic Yards
Trucker Name Smith
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39499

Date 6/30/06
Customer Shaw
Cust. No.
Job N. O S. Indian Head
Load No. 4
Tons
Cubic Yards
Trucker Name DJ Jordan
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39506

Date 6/30/06
Customer Shaw
Cust. No.
Job N. O S. Indian Head
Load No. 6
Tons
Cubic Yards
Trucker Name
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39497

Date 6/30/06
Customer Shaw
Cust. No.
Job NOS Indian Head
Load No. 2
Tons
Cubic Yards
Trucker Name C. Jones
Trucker No.
Type of Vehicle: ☒ S/A ☒ T/A ☐ Trailer

MATERIAL

☒ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39496

Date 6/30/06
Customer Shaw
Cust. No.
Job NOS Indian Head
Load No. 1
Tons
Cubic Yards
Trucker Name Smith
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

STINNETT'S GRAVEL
7480 Shirley Blvd.
Port Tobacco, MD 20677
(301) 246-4273

LOAD TICKET 39498

Date 6/30/06
Customer Shaw
Cust. No.
Job NOS Indian Head
Load No. 3
Tons
Cubic Yards
Trucker Name Dump
Trucker No.
Type of Vehicle: ☐ S/A ☒ T/A ☐ Trailer

MATERIAL

☐ BANK RUN
☐ TOP SOIL
☒ FILL MATERIAL
☐ OTHER

COMMENTS:

Dispatcher

Overweight Trucks are the Driver's Responsibility

Trucker Signature
Received by

White-Original Yellow-office Pink-Customer Gold-Customer

SECTION 6.0
MONITORING WELL
ABANDONMENT INFORMATION

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

****

WATER WELL ABANDONMENT-SEALING REPORT FORM

****

SUBMIT COPIES OF COMPLETED FORM TO:

- ★ COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- ★ WELL OWNER
- ★ MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 06/05/06 (month/day/year)

★ PERMIT NUMBER OF ABANDONED WELL (if any) MW -3 -

★ PERMIT NUMBER OF REPLACEMENT WELL N/A - -

★ PERSON ABANDONING WELL: Bill Kimes

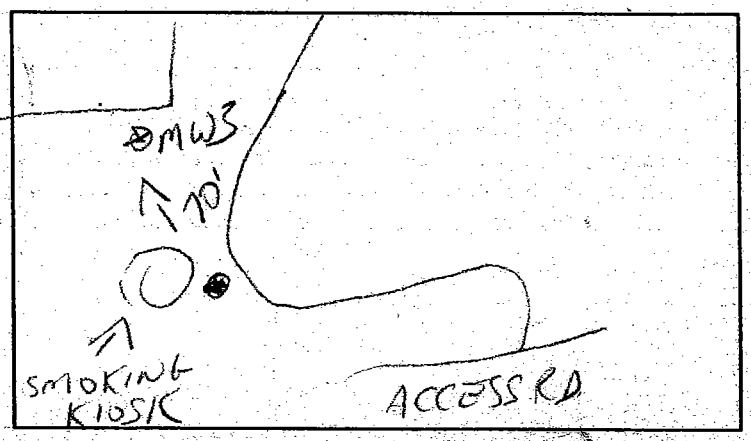
WELL DRILLERS LICENSE NUMBER: MD 081

CIRCLE: MWD/MSD/MGD

★ OWNER'S NAME: INDIANHEAD NSWC

★ WELL LOCATION:
COUNTY: CHARLES CTY
NEAREST TOWN: INDIAN HEAD
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
NEAREST ROAD: _____

SITE LOCATION MAP



★ TYPE OF WELL BEING ABANDONED:

_____ DRILLED _____ JETTED
✓ BORED/AUGERED _____ HAND DUG
_____ OTHER (specify) _____

★ USE CODE:

_____ DOMESTIC _____ MUNICIPAL/PUBLIC
_____ IRRIGATION _____ INDUSTRIAL
✓ TEST/OBSERVATION _____ GEOTHERMAL

★ TYPE OF CASING:

_____ STEEL ✓ PLASTIC
_____ CONCRETE _____ OTHER (specify)

★ SIZE OF CASING: 2 INCHES IN DIAMETER

★ DEPTH OF WELL: 14 FEET DEEP

★ WAS ANY CASING REMOVED? ____ YES ✓ NO
if yes, length removed, in feet: _____

★ WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
Bentonite	14	0'

VOLUME OF MATERIAL USED: 40 lbs

Bill Kimes — MD 081 — MWD/MSD/MGD — 06/05/06

SIGNATURE MASTER WELL DRILLER OR SUPERVISING SANITARIAN — LICENSE # — CIRCLE ONE — DATE

DENV 828 JULY 1997 3) WELL OWNER

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

****

WATER WELL ABANDONMENT-SEALING REPORT FORM

****

SUBMIT COPIES OF COMPLETED FORM TO:

- ★ COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- ★ WELL OWNER
- ★ MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 06/05/06 (month/day/year)

★ PERMIT NUMBER OF ABANDONED WELL (if any) MW - 1 -

★ PERMIT NUMBER OF REPLACEMENT WELL N/A - -

★ PERSON ABANDONING WELL: Bill Kimes

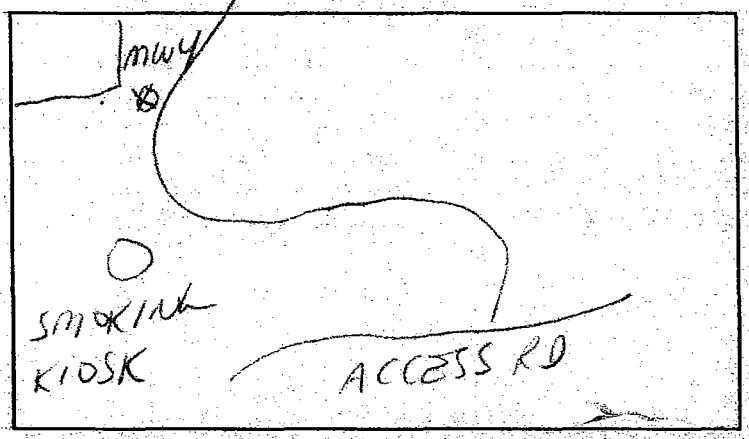
WELL DRILLERS LICENSE NUMBER: 081

CIRCLE: MWD/MSD/MGD

★ OWNER'S NAME: INDIANHEAD SWC

★ WELL LOCATION:
COUNTY: CHARLES
NEAREST TOWN: INDIAN HEAD
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
NEAREST ROAD: _____

SITE LOCATION MAP



★ TYPE OF WELL BEING ABANDONED:

_____ DRILLED _____ JETTED
✓ BORED/AUGERED _____ HAND DUG
_____ OTHER (specify) _____

★ USE CODE:

_____ DOMESTIC _____ MUNICIPAL/PUBLIC
_____ IRRIGATION _____ INDUSTRIAL
✓ TEST/OBSERVATION _____ GEOTHERMAL

★ TYPE OF CASING:

_____ STEEL ✓ PLASTIC
_____ CONCRETE _____ OTHER (specify)

★ SIZE OF CASING: 2 INCHES IN DIAMETER

★ DEPTH OF WELL: 15 FEET DEEP

★ WAS ANY CASING REMOVED? ____ YES ✓ NO
if yes, length removed, in feet: _____

★ WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
Bentonite	15	0'

VOLUME OF MATERIAL USED: 210 lbs

Bill Kimes — MGD 081 — MWD/MSD/MGD — 06/05/06

SIGNATURE MASTER WELL DRILLER OR SUPERVISING SANITARIAN — LICENSE # — CIRCLE ONE — DATE

DENV 828 JULY 1997 3) WELL OWNER

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

****

WATER WELL ABANDONMENT-SEALING REPORT FORM

****

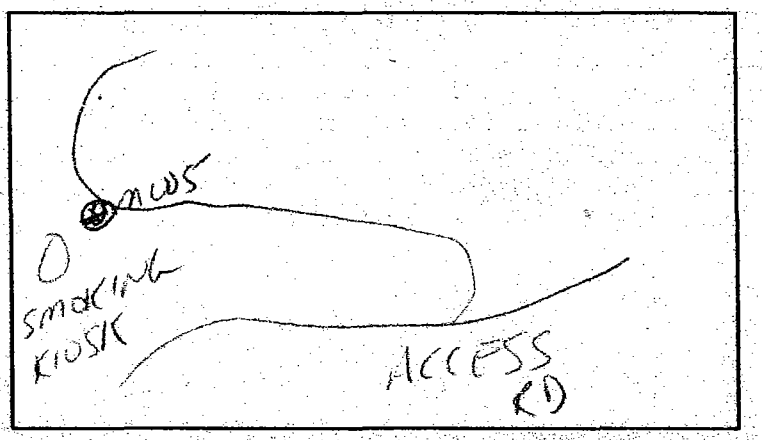
SUBMIT COPIES OF COMPLETED FORM TO:

* COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
* WELL OWNER
* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 06/05/06 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) MW - 5 -
* PERMIT NUMBER OF REPLACEMENT WELL N/A - -
* PERSON ABANDONING WELL: Bill Kimes WELL DRILLERS LICENSE NUMBER: 081
CIRCLE: MWD/MSD/MGD
* OWNER'S NAME: INDIANHEAD BSWC
* WELL LOCATION:
COUNTY: CHARLES
NEAREST TOWN: INDIANHEAD
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
NEAREST ROAD: _____

SITE LOCATION MAP



* TYPE OF WELL BEING ABANDONED:

_____ DRILLED _____ JETTED
✓ BORED/AUGERED _____ HAND DUG
_____ OTHER (specify) _____

* USE CODE:

_____ DOMESTIC _____ MUNICIPAL/PUBLIC
_____ IRRIGATION _____ INDUSTRIAL
✓ TEST/OBSERVATION _____ GEOTHERMAL

* TYPE OF CASING:

_____ STEEL ✓ PLASTIC
_____ CONCRETE _____ OTHER (specify) _____

* SIZE OF CASING: 2 INCHES IN DIAMETER
* DEPTH OF WELL: 16 FEET DEEP
* WAS ANY CASING REMOVED? ____ YES ✓ NO
if yes, length removed, in feet: _____
* WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
BENTONITE	16	0'

VOLUME OF MATERIAL USED: 40 lbs

Bill Kimes 453 081 MWD/MSD/MGD 06/05/06
SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE # CIRCLE ONE DATE

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

****

WATER WELL ABANDONMENT-SEALING REPORT FORM

****

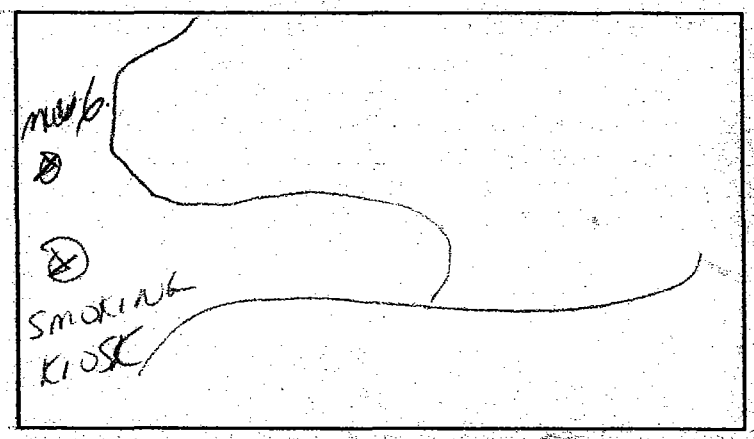
SUBMIT COPIES OF COMPLETED FORM TO:

* COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
* WELL OWNER
* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 06/05/06 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) MW - 6 -
* PERMIT NUMBER OF REPLACEMENT WELL N/A - -
* PERSON ABANDONING WELL: Bill Kimes WELL DRILLERS LICENSE NUMBER: 081
  CIRCLE: MWD/MSD/MGD
* OWNER'S NAME: INDIAN HEAD NSWC
* WELL LOCATION:
  COUNTY: CHARLES CTY
  NEAREST TOWN: INDIAN HEAD
  TAX MAP _____ BLOCK _____ PARCEL _____
  SUBDIVISION: _____
  SECTION: _____ LOT: _____
  NEAREST ROAD: _____

SITE LOCATION MAP



* TYPE OF WELL BEING ABANDONED:
  _____ DRILLED _____ JETTED
  ✓ BORED/AUGERED _____ HAND DUG
  _____ OTHER (specify) _____

* USE CODE:
  _____ DOMESTIC _____ MUNICIPAL/PUBLIC
  _____ IRRIGATION _____ INDUSTRIAL
  ✓ TEST/OBSERVATION _____ GEOTHERMAL

* TYPE OF CASING:
  _____ STEEL ✓ PLASTIC
  _____ CONCRETE _____ OTHER (specify) _____

* SIZE OF CASING: 2 INCHES IN DIAMETER
* DEPTH OF WELL: 16 FEET DEEP
* WAS ANY CASING REMOVED? ____ YES ✓ NO
  if yes, length removed, in feet: _____
* WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
BENTONITE	16'	0'

VOLUME OF MATERIAL USED: 40 lbs

Bill Kimes — MD 081 — MWD/MSD/MGD — 06/05/06
SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN — LICENSE # — CIRCLE ONE — DATE

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

****

WATER WELL ABANDONMENT-SEALING REPORT FORM

****

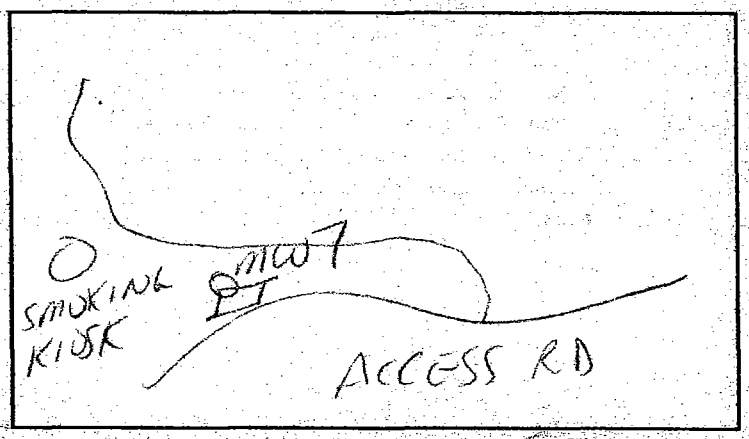
SUBMIT COPIES OF COMPLETED FORM TO:

* COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
* WELL OWNER
* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 06/05/06 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) MW-7-
* PERMIT NUMBER OF REPLACEMENT WELL N/A - -
* PERSON ABANDONING WELL: Bill Kimes
* WELL DRILLERS LICENSE NUMBER: 081
  CIRCLE: MWD/MSD/MGD
* OWNER'S NAME: INDIANHEAD NSWC
* WELL LOCATION:
  COUNTY: CHARLES CTY
  NEAREST TOWN: INDIAN HEAD
  TAX MAP _____ BLOCK _____ PARCEL _____
  SUBDIVISION: _____
  SECTION: _____ LOT: _____
  NEAREST ROAD: _____

SITE LOCATION MAP



* TYPE OF WELL BEING ABANDONED:
  _____ DRILLED _____ JETTED
  ✓ BORED/AUGERED _____ HAND DUG
  _____ OTHER (specify) _____

* USE CODE:
  _____ DOMESTIC _____ MUNICIPAL/PUBLIC
  _____ IRRIGATION _____ INDUSTRIAL
  ✓ TEST/OBSERVATION _____ GEOTHERMAL

* TYPE OF CASING:
  _____ STEEL ✓ PLASTIC
  _____ CONCRETE _____ OTHER (specify) _____

* SIZE OF CASING: 2 INCHES IN DIAMETER
* DEPTH OF WELL: 21 FEET DEEP
* WAS ANY CASING REMOVED? ____ YES ✓ NO
  if yes, length removed, in feet: _____
* WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
BENTONITE	21'	0'

VOLUME OF MATERIAL USED: 40 lbs

Bill Kimes — 081 — MWD/MSD/MGD — 06/05/06
SIGNATURE MASTER WELL DRILLER OR SUPERVISING SANITARIAN — LICENSE # — CIRCLE ONE — DATE

DENV 828 JULY 1997 3) WELL OWNER

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

****

WATER WELL ABANDONMENT-SEALING REPORT FORM

****

SUBMIT COPIES OF COMPLETED FORM TO:

- ★ COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- ★ WELL OWNER
- ★ MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 06/05/06 (month/day/year)

★ PERMIT NUMBER OF ABANDONED WELL (if any) MW - 8 -

★ PERMIT NUMBER OF REPLACEMENT WELL N/A - -

★ PERSON ABANDONING WELL: Bill Times

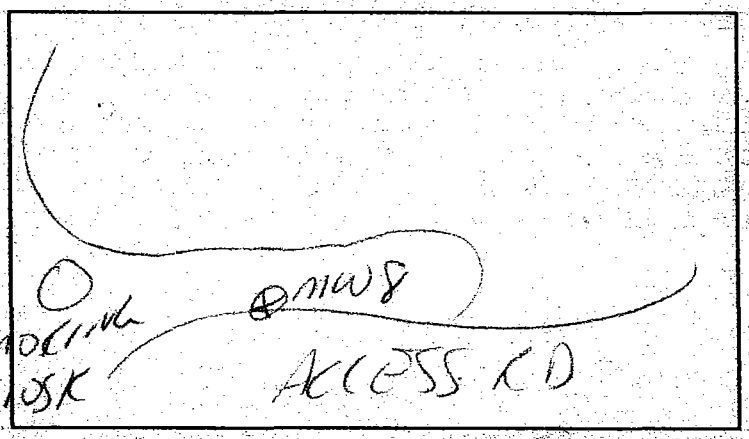
WELL DRILLERS LICENSE NUMBER: 081

CIRCLE: MWD/MSD/MGD

★ OWNER'S NAME: INDIAN HEAD NSWC

★ WELL LOCATION:
COUNTY: CHARLES
NEAREST TOWN: INDIAN HEAD
TAX MAP _____ BLOCK _____ PARCEL _____
SUBDIVISION: _____
SECTION: _____ LOT: _____
NEAREST ROAD: _____

SITE LOCATION MAP



★ TYPE OF WELL BEING ABANDONED:

_____ DRILLED _____ JETTED
✓ BORED/AUGERED _____ HAND DUG
_____ OTHER (specify) _____

★ USE CODE:

_____ DOMESTIC _____ MUNICIPAL/PUBLIC
_____ IRRIGATION _____ INDUSTRIAL
✓ TEST/OBSERVATION _____ GEOTHERMAL

★ TYPE OF CASING:

_____ STEEL ✓ PLASTIC
_____ CONCRETE _____ OTHER (specify)

★ SIZE OF CASING: 2 INCHES IN DIAMETER

★ DEPTH OF WELL: 15 FEET DEEP

★ WAS ANY CASING REMOVED? ____ YES ✓ NO
if yes, length removed, in feet: _____

★ WAS CASING RIPPED OR PERFORATED? ____ YES ✓ NO

LOG OF SEALING MATERIAL

MATERIAL	FEET FROM	FEET TO
BENTONITE	15'	0'

VOLUME OF MATERIAL USED: 40 lbs

Bill Times MD 081 MWD/MSD/MGD 06/05/06
SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE # CIRCLE ONE DATE

DENV 828 JULY 1997 3) WELL OWNER

SECTION 7.0
PRE-FINAL INSPECTION
PUNCHLIST

Punch List Items
From the IH Site 57 Pre-Final Inspection
Conducted 07/06/2006

Contract #N62470-03-D-4402 Task Order No. 25
Interim Removal Action at Site 57 – Building 292 TCE Removal

Attendees:

Cathy Gardner, NAVFAC WASH
Jim Desmond, NAVFAC WASH
Jeff Morris, NAVFAC WASH
Shawn Jorgensen, NSF-IH
Bill Simpson, FSSI
Steve Carriere, Shaw E&I
Cano Hernandez, Shaw E&I
Adam Forshey, Shaw E&I

ITEM NO.	DESCRIPTION	DATE COMPLETED
	Site 57 – Building 292 TCE Contamination Removal	
	Area A	
1	Install CR-6 and compact in lot area next to Building 292	7-13-06
2	Replace asphalt in the lot	7-20-06
3	Place topsoil in section between lot and driveway	7-13-06
4	Seed, fertilize, and mulch topsoil area	7-13-06
5	Cut asphalt and removed chipped asphalt from Area A driveway	7-10-06
6	Install CR-6 and compact in Area A driveway	7-11-06
7	Replace asphalt for the driveway	7-19-06
8	Replace Smoking Gazebo back in original location and reconnect electrical	7-14-06
9	Remove high visibility fence from around Monitoring Wells and Building 292 stairway	7-14-06
10	Remove damaged concrete from storm water culvert and replace with new concrete	7-11-06
Navy Item 1	6 ft. section of corrugated pipe in the storm water culvert needs replaced. It has rusted through in several areas	
	Area B	
11	Place topsoil	7-11-06
12	Seed, fertilize, and mulch topsoil area	7-11-06
13	Remove all high visibility fence around Area B	7-14-06
Navy Item 2	Install sleeve for valve in Area B (where PVC sleeve is currently located)	7-20-06
	Area C	
14	Complete backfill and compaction of Area C	7-08-06
15	Place topsoil	7-13-06
16	Seed, fertilize, and mulch topsoil area	7-13-06
17	Install CR-6 and compact	7-11-06
18	Replace asphalt in roadway and parking area	7-19-06
19	Remove high visibility fence and road barriers	7-12-06
	Staging Area	
20	Remove decon pad	7-11-06
21	Clean debris from area around decon pad	7-11-06

22	Remove damaged asphalt (7-13-06), place CR-6 (7-14-06), compact (7-14-06), and replace with new asphalt	7-19-06
23	Take down high visibility fence around staging area	7-12-06
24	Move trailer back to original location	7-08-06
25	Clean and sweep entire staging area	7-08-06
	General	
26	Repair tire marked areas along roadway (including seed, fertilize, and mulch)	7-14-06
27	Perform final sweep of all paved areas	7-14-06
28	Upon State & ROICC approval, removal all E&S features	

SECTION 8.0
FINAL INSPECTION
PUNCHLIST

Punch List Items
From the IH Site 57 Final Inspection
Conducted 07/24/2006

Contract #N62470-03-D-4402 Task Order No. 25
Interim Removal Action at Site 57 – Building 292 TCE Removal

Attendees:

Cathy Gardner, NAVFAC WASH
Jim Desmond, NAVFAC WASH
Joe Rail, NAVFAC WASH
Shawn Jorgensen, NSF-IH
Bill Simpson, FSSI
Steve Carriere, Shaw E&I
Cano Hernandez, Shaw E&I
Adam Forshey, Shaw E&I

ITEM NO.	DESCRIPTION	DATE COMPLETED
	Site 57 – Building 292 TCE Contamination Removal	
1	Dump decon water out on ground (per S. Jorgensen).	07/25/06
2	Place stone in bare area between Thomas Rd. and the driveway road just south of the Smoking Gazebo.	07/25/06
3	Remove topsoil from Area C and replace with 2”-3” stone back to existing stone.	07/25/06
4	Place topsoil from Area C in the hole southeast of excavation Area B (use tape to mark and identify existing conduit before backfilling.	07/25/06
5	Seed, fertilize, and mulch topsoil placed in the hole Southeast of excavation Area B.	07/25/06

SECTION 9.0
BOD LETTER

DEPARTMENT OF THE NAVY

NAVAL FACILITIES ENGINEERING COMMAND WASHINGTON
FACILITIES ENGINEERING AND ACQUISITION DIVISION
PROJECT MANAGEMENT AND ENGINEERING BRANCH
PUBLIC WORKS DEPARTMENT SOUTH POTOMAC, SITE INDIAN HEAD
101 STRAUSS AVE, BLDG. 551, NSF INDIAN HEAD, MD 20640

N62470-03-D-4402/0025
SER 09C1CG
7 August 7 2006

FIELD SUPPORT SERVICES INCORPORATED
3900 C STREET
SUITE 803
ANCHORAGE ALASKA, 99503-55969

Subj: CONTRACT N62470-04-D-4402–REMEDIAL ACTION SITE 57, BUILDING 292 TCE CONTAMINATION, NAVAL SURFACE WARFARE CENTER, INDIAN HEAD, MARYLAND

Gentlemen:

Final inspection of the work at Site 57 under the subject delivery order was conducted on 24 July 2006. The inspection party included:

William Simpson – Supertendent , FSSI
Steve Carriere- FSSI, Project Manager
Cathy Gardner- FEAD, Indian Head
Shawn Jorgenson- Environmental, Indian Head
Joe Rail – NAVFAC, Environmental
Adam Forshey – FSSI
Cano Hernandez, – FSSI

The inspection resulted in the Government declaring site 57 of the subject project as being usably complete on 24 July 2006 in accordance with the FAR Clause entitled *Inspection of Construction*. The final acceptance of this project is subject to the correction of the deficiencies listed on the enclosed punch list. It is requested these punch list items be corrected and inspected within thirty calendar days in order to ensure timely contract closeout and final payment.

In accordance with the "Warranty of Construction" provisions of the contract, you are reminded acceptance by the Government marks the commencement of all warranties. To facilitate correction of deficiencies that may develop during the warranty period, the Public Works Department of the Indian Head Division, Naval Surface Warfare Center, has been authorized to direct all requests for correction directly to your firm. It is your responsibility to take immediate corrective action if determined to be your responsibility. If you determine that the corrections requested are not your responsibility, you should notify the Public Works Department, in writing, immediately.
If warranty matters cannot be resolved expeditiously, you will be contacted by this Contracting Office. Note that work considered to be maintenance shall not be accomplished by your firm under the subject contract without specific written authority from this office. If there are any questions, please contact Cathy Gardner at 301-744-2181.

Sincerely,

David Wilhite
Supervisory Engineer

Punch List for

CONTRACT N62470-03-D-4402/0025

Site 57

1. Closeout Reports w/ electronic files for Site 57