

c.m. laboratories, inc.

Hazardous Waste Consulting & Transportation

223
CI,
104 e's NAK

P 379 754108

April 9, 1993



SDMS DocID

448767

Marilyn K. Goldberg
U.S. Environmental Protection Agency
P.O. Box 221470
Chantilly, VA 22022

Dear Marilyn:

I am enclosing a copy of what I believe was forwarded to Lee Bishop (copies enclosed) back on Feb. 2, 1993 via Federal Express (airbill enclosed). It is certainly possible that the report was eliminated from this package.

I have enclosed a copy of the report once again. If there are any questions or information missing, please notify me as quickly as possible. It is not our intent to be delinquent in any way in responding to your request.

Thank you for the various conversation we have had during this very lengthy and unfortunate situation.

Sincerely,

Jean M. Foley
Jean M. Foley

ENC:

C.M. Laboratories, inc.

Hazardous Waste Consulting & Transportation

CERTIFIED P 272 962 917

January 30, 1993

Marilyn K. Goldberg
U.S. Environmental Prot. Agency
P.O. Box 221470
Chantilly, VA 22022

Dear Marilyn:

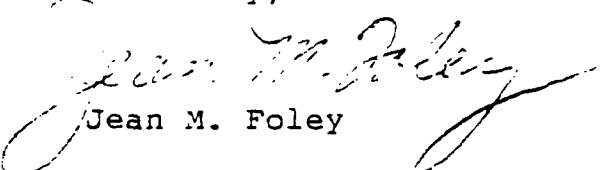
Thank you for your information of last week. We, C.M. Labs, have been in contact with various facilities trying to uncover information about our shipments into SRSNE.

We did respond to your letter in plenty time asking for an extension. We never received a formal written extension but did speak with you.

By way of this letter we are responding to your request. We find this process so frustrating in trying to get answers from any source.

Marilyn, I certainly hope this letter clears up any uncertainty that your agency has in regards to our lack of response.

Sincerely,


Jean M. Foley

*Unbill
see #11*

5. (continued)

Name: Stephen SacksAddress: Chicopee Road
StANDISH, MAINEPhone No. NOT KNOWN -Relation to Respondent Former Sacks Manager During
The Time Shipments Were Sent To SRS..

Name: _____

Address: _____

Phone No. _____

Relation to Respondent: _____

6. Please identify the person(s) completing this questionnaire and identify the relationship to the Respondent. Attach extra pages if necessary.

Name: Eugene B McGuffAddress: One Commercial Road
Scarborough, ME 04074Phone No. 207 583 8355Relation to Respondent: owner

Name: _____

Address: _____

Phone No. _____

Relation to Respondent: _____

c.m. laboratories, inc.

Hazardous Waste Consulting & Transportation

CERTIFIED P 272 962 917

January 30, 1993

Marilyn K. Goldberg
U.S. Environmental Prot. Agency
P.O. Box 221470
Chantilly, VA 22022

Dear Marilyn:

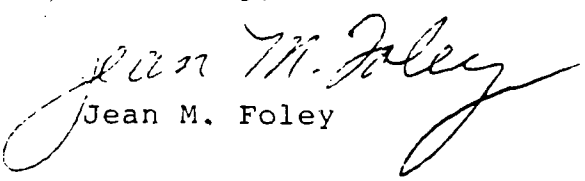
Thank you for your information of last week. We, C.M. Labs, have been in contact with various facilities trying to uncover information about our shipments into SRSNE.

We did respond to your letter in plenty time asking for an extension. We never received a formal written extension but did speak with you.

By way of this letter we are responding to your request. We find this process so frustrating in trying to get answers from any source.

Marilyn, I certainly hope this letter clears up any uncertainty that your agency has in regards to our lack of response.

Sincerely,


Jean M. Foley

ENCLOSURE B

Solvents Recovery Service of New England
104(e) Information Request for Brokers
(i.e., SRSNE Customers Who are Not Generators)

1. Name of Respondent: C.M. LABORATORIES INC
2. Date Information Request Completed: 11/27/92
3. For each transaction listed on Form 1 (attached) in which you arranged for another person's waste material to be treated or disposed of at the Site or arranged with a transporter for transport of waste material to be treated or disposed of at the Site, identify who selected the Site for treatment or disposal of these wastes. Attach copies of all documents consulted, examined, or referred to in the preparation of answers to these questions.
4. At the end of Form 1 and consistent with the format of Form 1, identify and provide complete information, including identification of waste type, on any additional transactions in which you arranged for waste material to be treated or disposed of at the Site or arranged with a transporter for transport of waste material to be treated or disposed of at the Site which do not already appear on Form 1. Also identify and provide complete information on any transactions which you believe are in some manner incorrectly recorded on Form 1. Attach copies of all documents which provide information on these transactions.
5. Please identify all persons consulted in the preparation of the answers to these questions. Indicate their relationship to the Respondent (e.g., current employee - environmental manager, past employee - maintenance department, etc.). Attach extra pages if necessary.

Name: Eugene B McGur2

Address One Commercial Road

Scarborough ME 04074

Phone No. 207 883 5395

Relation to Respondent owner

5. (continued)

Name: Stephen Sacks

Address: Chicopee Road
Standish, Maine

Phone No. NOT KNOWN

Relation to Respondent Former Sales Manager During
The Time Shipments were sent to SRS.

Name: _____

Address: _____

Phone No. _____

Relation to Respondent: _____

6. Please identify the person(s) completing this questionnaire and identify the relationship to the Respondent. Attach extra pages if necessary.

Name: Eugene B. Mc Guff

Address: U.S. Commercial Road
Scarborough, ME 04074

Phone No. 207 883 8355

Relation to Respondent: owner

Name: _____

Address: _____

Phone No. _____

Relation to Respondent: _____

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
			C.M. LABORATORIES AS TRANSPORTER	
A.J. Cole & Sons	12/06/88	55.00 ✓	S. SACKS	Thinners
Carroll Industries, Inc.	05/18/88	440.00	CTC 0125377	NJR FUMMANT SOLID SOIL FOR INCINERATION NOT PROCESSED AT SRJ
Concord Litho Company	03/29/88	550.00	CTC 0125379	} * NOTE MATERIAL IS NONHAZARDOUS } * NOTE MATERIAL IS NONHAZARDOUS } * NOTE MATERIAL IS NONHAZARDOUS SHOULD NOT BE USED FOR VOLUME COUNTING
	06/15/88	220.00	CTC 0125376	
	10/25/88	495.00	CTC 0208618	
Costar Corporation	05/18/88	25.00 ✓		SACKS.
	05/18/88	55.00 ✓		
	08/11/88	40.00 ✓	MANIFEST MFA-013312 1 DRUM.	* SO ₂ on manifest Reflects Storage ID next to PIN Number Reflects Incinerable Drum Should not count in TOTAL.

Notes:

- The transaction date refers to the date the waste was delivered to SRSNE. Therefore, this date may not match exactly with your records. EPA expects you to make your best efforts to correlate your records with EPA's documents. This is to prevent double-counting of shipments in EPA's volumetric ranking.
- All gallon volumes are waste-in transactions to SRSNE.
- e.g., XYZ Chemical Company - generator; ABC Waste Trucking - transporter; EFG Waste Disposal Service - broker.
- Please state waste type by chemical name. If the chemical name is not known, please state the trade name and the manufacturer's name.

* These wastes should not be part of volumetric ranking. Since handling indicates only Storage (SO₂) and PIN Number = ID Incinerable Drum

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3) <i>C.M. Laboratories AS TRANSPORTED</i>	Waste Type (4) [For additional transactions only]
D orme Mapping Company	03/29/88	165.00 ✓		SSACKS
	03/29/88	110.00 ✓		SSACKS
A than Allen Inc., Beecher Falls Div.	12/06/88 ✓	110.00 .		B COTE
F orster Manufacturing Company	04/20/88	1,155.00 ✓		EMCurl.
L ake Champlain Transportation Company	07/18/88	825.00	Manifest CTC 0167847 15 DRUM)	SSACKS * NOTE HANDLING WAS STORAGE OIL SCRUBBED SAND Non RCRA Non DOT Non EPA
Lane Press, Inc., The	03/10/88 ✓	495.00 ✓		NOT KNOWN
	03/16/88 ✓	220.00 ✓		
	08/11/88 ✓	110.00 /		
Maine Yankee Atomic Power Company	11/01/88 / ✓	1,100.00	Manifest CTC 0208620	SSACKS * Item is Non RCRA SOLID REGULATED WASTE 90.55% Petroleum Oil & Div. Sol
	11/01/88 ✓	165.00 ✓		* This is Non RCRA Non Hazardous
	12/06/88 ✓	20.00 ✓		
Montalvo Corporation, The	03/29/88 ✓	275.00 ✓		SSACKS

* These should be removed from Volume One Ranking
because either skipped off silt (not processed) or Non Hazardous

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3) <i>C.M. Laboratories as Transporter</i>	Waste Type (4) [For additional transactions only]
	03/29/88	53.00		S SACKS
	03/29/88	55.00		
	03/29/88	2.00		
	03/29/88	55.00		
	10/25/88	165.00		
	10/25/88	55.00		
Nasco Automotive Machine	08/11/88	220.00		S SACKS.
Newport Plastics Corporation	04/13/88	385.00	Manifest CFC 0125395	* NOTE SO1 - Storage - Product Code ID? Incinerable Drum
	06/29/88	55.00	Manifest CFC 0167835	* NOTE SO1 - Product Code ID Incinerable Drum.
	10/25/88	110.00	Manifest CFC 0208647	* NOTE SO1 - Product Code ID Incinerable Drum.
	12/27/88	110.00	Manifest VT 00 24635	* NOTE SO1 - Product Code NO ID? Incinerable Drum.
Queen City Printers, Inc.	03/29/88	110.00	Manifest CFC 0125378	* NOTE SO1 = Storage NOT Processed at SRS. ID = Incinerable Drum
	08/11/88	110.00	Manifest CFC 0167834	* NOTE SO1 Storage only and ID Incinerable Drum
	11/14/88	110.00	Manifest CFC 0208632	* NOTE SO1 ID Incinerable Drum PIN 014505 ID.

* NOTE these wastes should not be part of volumetric ranking, since handling indicates Storage (SO1) and PIN number either ID Incinerable Drum

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3) <i>C.M. LABORATORIES AS TRANSPORTER</i>	Waste Type (4) [For additional transactions only]
Rockwood Systems Corporation	✓ 03/29/88	100.00 ✓	EM Gunf. ↓	
	✓ 03/29/88	50.00 ✓		
	✓ 03/29/88	50.00 ✓		
SAS Pittsfield	✓ 03/29/88	150.00 ✓	NOT KNOWN	
Spencer Press, Inc.	✓ 03/29/88	770.00 ✓	NOT KNOWN ↓	
	✓ 06/29/88	660.00 ✓		
	✓ 12/06/88	825.00 ✓		CTC 0135165
Vermont Tubbs, Inc.	✓ 03/16/88	385.00	MANUFACT CTC 0125397	* SOL - Storage Code - WASTE IS NON HAZARDOUS PIN # G02 GROUND DRUM
	✓ 06/02/88	250.00 ✓		
State of Vermont, Dept. of Transportation	✓ 02/03/88	495.00	5 SACKS ↓	
	✓ 02/03/88	330.00		
	✓ 02/03/88	275.00		
	✓ 02/03/88	220.00		

* MATERIAL should be removed from Volumetric Ranking Due to Waste Characteristic, Handling such as PIN Number.

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
	✓ 02/03/88	30.00	SSACKs	
	✓ 02/03/88	110.00		
	✓ 02/03/88	165.00		
	✓ 02/03/88	55.00		
	✓ 02/03/88	110.00		
	✓ 02/03/88	55.00		
	✓ 02/03/88	55.00		
	✓ 02/03/88	55.00		
	✓ 02/03/88	30.00		
	✓ 04/20/88	165.00		
	✓ 04/20/88	110.00		
	✓ 06/02/88	770.00		
	✓ 06/02/88	495.00		
	✓ 06/02/88	110.00		
	✓ 06/02/88	55.00		
	✓ 06/02/88	220.00		

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
	✓ 06/29/88	55.00	S Socks	
	✓ 06/29/88	10.00		
	✓ 06/29/88	50.00		
	✓ 06/29/88	220.00		
	✓ 06/29/88	55.00		
	✓ 06/29/88	165.00		
	✓ 06/29/88	25.00		
	✓ 06/29/88	55.00		
	✓ 06/29/88	55.00		
	✓ 06/29/88	110.00		
	✓ 06/29/88	50.00		
	✓ 06/29/88	110.00		
	✓ 06/29/88	55.00		
	✓ 06/29/88	55.00		
	✓ 07/18/88	55.00		
	✓ 07/18/88	55.00		

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
	~07/18/88	55.00	Sacks	
	\07/18/88	110.00		
	\07/18/88	50.00		
	\08/11/88	150.00		
	\08/11/88	110.00		
	\08/15/88	110.00		
	\08/15/88	770.00		
	\08/15/88	495.00		
	\08/15/88	110.00		
	\08/15/88	55.00		
	\08/15/88	110.00		
	\08/15/88	825.00		
	\08/15/88	55.00		
	\08/15/88	110.00		
	\08/15/88	275.00		
	\08/15/88	55.00		

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
	✓ 08/15/88	110.00	S Sack	
	✓ 08/30/88	55.00		
	✓ 08/30/88	55.00		
	✓ 08/30/88	110.00		
	✓ 08/30/88	55.00		
	✓ 08/30/88	220.00		
	✓ 08/30/88	55.00		
	✓ 08/30/88	55.00		
	✓ 08/30/88	55.00		
	✓ 08/30/88	165.00		
	✓ 08/30/88	55.00		
	✓ 08/30/88	55.00		
	✓ 08/30/88	55.00		
	✓ 08/30/88	55.00		
	✓ 08/30/88	55.00		
	✓ 08/30/88	110.00		

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
	✓ 08/30/88	165.00	SACK)	
	✓ 08/30/88	55.00		
	✓ 09/15/88	2,585.00		
	✓ 09/19/88	1,815.00		
	✓ 10/04/88	55.00		
	✓ 10/04/88	55.00		
	✓ 10/04/88	275.00		
	✓ 10/04/88	110.00		
	✓ 10/04/88	165.00		
	✓ 11/01/88	110.00		
	✓ 11/01/88	110.00		
	✓ 11/01/88	110.00		
	✓ 11/01/88	55.00		
	✓ 11/01/88	220.00		
	✓ 11/01/88	55.00		
	✓ 11/01/88	100.00		

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
	✓ 11/01/88	55.00	S Sacks	
	✓ 11/01/88	40.00		
	✓ 11/01/88	55.00		
	✓ 11/01/88	50.00		
	✓ 11/01/88	55.00		
	✓ 11/14/88	225.00		
	✓ 11/14/88	225.00		
	✓ 11/14/88	550.00		
	✓ 11/14/88	55.00		
	✓ 11/14/88	55.00		
	✓ 11/14/88	55.00		
	✓ 11/14/88	55.00		
	✓ 11/14/88	55.00		
	✓ 11/14/88	55.00		
	✓ 11/14/88	55.00		
	✓ 11/14/88	110.00		

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
	✓ 12/12/88	990.00	B Morrill + S Socks	
	✓ 12/12/88	330.00		
	✓ 12/12/88	110.00		
	✓ 12/12/88	330.00		
	✓ 12/12/88	110.00		
	✓ 12/12/88	55.00		
	✓ 12/12/88	55.00		
	✓ 12/12/88	55.00		
	✓ 12/12/88	55.00		
	✓ 12/12/88	55.00		
	✓ 12/12/88	55.00		
	✓ 12/12/88	55.00		
	✓ 12/12/88	50.00		
	✓ 12/12/88	10.00		
	✓ 12/12/88	15.00		
	✓ 12/12/88	15.00		

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
	✓ 12/12/88	165.00	B. Merrill & S Sacks.	
	✓ 12/12/88	50.00		
	✓ 12/12/88	220.00		
	✓ 12/12/88	55.00		
	✓ 12/27/88	100.00		
	✓ 12/27/88	275.00		
	✓ 12/27/88	110.00		
Weathered Estate Furniture	✓ 03/29/88	55.00	CTC 0125383 Not Known	* NOT SOL - Stumps and Waste Solid Material ID Incinerable DRUM.
	✓ 06/15/88	55.00	MKA 030019	* Same as above.
Plaza Realty Company	✓ 10/25/88	55.00 ✓	Not Known	
E.H.V. Weidmann Industries, Inc.	✓ 07/18/88	880.00	CTC 0167844 Not Known	* Flammable Solid NOT Processed at SRS - (SOL) ID = INCINERABLE DRUM.
	✓ 11/14/88	605.00	CTC 0208633	* Item is a Flammable Solid = SOL INCINERABLE DRUM.
	✓ 11/14/88	495.00 •		
	✓ 11/17/88	1,100.00 •		

* Wastes should be removed from Volumetric Ranking due to Characteristic of waste, and handling at SRS.

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
Nichols Gray	08/11/88	165.00	Manifest MGD 013304 NOT Known	* Material is Non Hazardous Non RCRA - Non DOT.
State of Maine, Dept. of Envir. Prot.	✓ 06/15/88	30.00		
	✓ 06/15/88	55.00		
	✓ 06/15/88	55.00		
	✓ 06/15/88	55.00		
	✓ 11/17/88	330.00	Manifest CTC 0208635	Material SOL Storage Solid ID = INCINERABLE DRUM.
	✓ 11/17/88	55.00		
	✓ 11/17/88	165.00		
Ethan Allen, Inc., Orleans Div.	✓ 10/25/88	330.00	Manifest CTC 0208604 NOT Known	Non Hazardous Waste SD = GROUND DRUM.
Chem Clean Furniture	✓ 12/18/87	440.00	Manifest CTC 0125366 NOT Known	NOTE Waste was Solid = ID INCINERABLE DRUM - Also handling Code SOL = STORAGE
Carroll Industries, Inc.	✓ 04/13/87	1,100.00	Manifest CTB 0082704	NOTE: Flammable Solid - NOT Processed at SRS. PIN Number SD GROUND DRUM.
Concord Litho Company	✓ 04/03/87	715.00		EMIGRANT
	✓ 07/27/87	440.00		↓

* MATERIAL should be removed from Volumetric Ranking due to Characteristic of Waste, and Processing Code

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
	✓ 11/09/87	495.00		
Ethan Allen Inc., Beecher Falls Div.	✓ 01/11/90	55.00		NOT KNOWN
Guilford Industries, Inc.	✓ 02/29/88	110.00	Manifest CTC 0125399	* Both items 11a & 11b are non hazardous
	✓ 02/29/88	110.00	" "	" "
Irving Tanning Company	✓ 01/17/91	385.00		EMIGUAL
Maine Yankee Atomic Power Company	✓ 04/26/90	55.00	M&A 02993	5 SACKS LINE 11-B Non hazardous waste Solid SO2 Code Incinerable Drum
Newport Plastics Corporation	✓ 04/16/87	55.00	VT 0024635	5 SACKS * SO2 STORAGE - ALSO ED = Incinerable Drum
Queen City Printers, Inc.	✓ 08/19/87	385.00	Manifest CTD 6082721	NOT KNOWN * SO2 STORAGE - ALSO ED = Incinerable Drum
Rockwood Systems Corporation	✓ 01/18/90	55.00	Manifest M&A 029940	LINE 11-a Non hazardous waste EMIGUAL
	✓ 01/18/90	50.00	" " " "	LINE 11b Non hazardous waste
	✓ 01/18/90	55.00	" " " "	" " " "
	✓ 03/30/90	55.00	Manifest M&A 029975	LINE 11a Non hazardous waste

* Material Shipped has been removed from Volumetric RANKING either due to being stored, not processed and code numbers

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
	✓ 03/30/90	100.00		
Spencer Press, Inc.	✓ 10/02/87	2,035.00 ✓	NOT KNOWN	
	✓ 11/25/87	880.00 ✓		
Vermont Tubbs, Inc.	✓ 09/23/87	880.00 .	NOT KNOWN	
State of Vermont, Dept. of Transportation	✓ 12/22/87	110.00	B Merrill & 3 Sacks	
	✓ 12/22/87	220.00	↓	
	✓ 12/22/87	55.00		
	✓ 12/22/87	55.00		
Washburn & Doughty Associates, Inc.	✓ 04/19/90	275.00 ✓	NOT KNOWN	
	✓ 08/17/90	165.00 ✓		
	✓ 12/06/90	165.00 ✓		
Weathered Estate Furniture	✓ 06/28/90	165.00	Manifest TC 016 7860	NOT KNOWN * NOT SOL - STORAGE and Code Number INCINERABLE DRUM.
	✓ 12/06/90	110.00	Manifest MRA 047203	* NOT WASTE DESCRIPTION ALSO INCINERABLE DRUM.

* MATERIALS SHOULD BE REMOVED FROM JOHANNESSEN PARKING, DUE TO WASTE CHARACTERISTICS AND HANDLING AND PROPER CODE VERIFICATION.

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
Ethan Allen, Island Pond Div.	✓ 03/05/87	275.00	Manifest VT 0016407	LINE 11-a Flammable Solvent INCINERABLE DRUM SOL
	✓ 03/05/87	880.00	" "	LINE 11-b
Ethan Allen, Burnham Div.	✓ 04/13/87	605.00	Manifest CT B0079290	Flammable Solid SOL INCINERABLE DRUM.
Sebago, Inc.	✓ 01/26/90	330.00		SSACKS
	✓ 06/19/90	440.00		
Cooper Industries, Arrow Hart Div.	01/18/90	55.00		SSacks
	03/30/90	350.00		
Bangor Hydro-Electric Company	✓ 08/17/90	165.00		EM'Gual
	✓ 08/17/90	185.00		
	✓ 08/17/90	150.00		
Buyers Digest	✓ 09/10/90	55.00	VT 0029116	EM'Gual. NOTE MATERIAL IS NON HAZARDOUS VT 14 is a Vermont Regulation NON RCRA NON DOT
Henry L. Hinckley Company	✓ 04/19/90	110.00	MLB# 029990	EM'Gual LINE 11 b Flammable Solid INCINERABLE DRUM SOL

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
	✓ 04/19/90	55.00	Manufact MGA 029990 EMIGUAL	LINE 11-A Flammable Solids INCINERABLE DRUM SOL
	✓ 06/28/90	55.00 ✓	Manufact MGA 030036	LINE 11-b Flammable Solids INCINERABLE DRUM SOL
	✓ 06/28/90	110.00 ✓		
	✓ 08/30/90	55.00 ✓		
	✓ 08/30/90	100.00 ✓		
	✓ 10/26/90	220.00 ✓	Manufact BFC	
	✓ 10/26/90	55.00	MGA 030096	LINE 11-B Flammable Solids INCINERABLE DRUM SOL
Damon Clinical Labs	✓ 04/06/90	55.00 ✓		
	✓ 06/19/90	55.00 ✓		
	✓ 12/17/90	55.00 ✓		
Down East Chemical Corporation	✓ 10/26/90	15.00 ✓		
	✓ 10/26/90	15.00 ✓		
	✓ 10/26/90	30.00 ✓		
	✓ 10/26/90	45.00 ✓		
	✓ 10/26/90	55.00 ✓		

B McGual
↓

B McGual
↓

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
Gabriel Electronics, Inc.	07/26/90	✓ 660.00	MBA 030047	* Non Hazardous Material Detergent & Water
Scarborough Sanitary District	✓ 01/17/91	30.00 ✓		⊗ M'Guire
	✓ 01/17/91	50.00 ✓		
Bryan's Auto Body	✓ 01/17/91	26.00 ✓		NOT KNOWN
Independent Cable Inc.	✓ 07/26/90	55.00	Manufact MA C232315	⊗ M'Guire Flammable Solid INCINERABLE DRUM SO2
Pioneer Plastics Corporation	✓ 01/18/90	55.00 ✓	Manufact MBA 029946	⊗ M'Guire
	✓ 01/18/90	110.00 ✓		
	✓ 01/18/90	220.00	Manufact MBA 029946	LINE 11 A Flammable Solid INCINERABLE DRUM
	✓ 01/18/90	385.00	Manufact MBA 029946	LINE 11 B Flammable Solid INCINERABLE DRUM
	✓ 11/05/90	165.00	Manufact MBA 030084	LINE 11 b Flammable Solid INCINERABLE DRUM
	✓ 11/05/90	165.00	Manufact MBA 030084	
	✓ 11/05/90	55.00 ✓	Manufact MBA 030084	LINE 11 a Non Hazardous WASTE
Maine Wood Turning, Inc.	12/06/88	110.00		

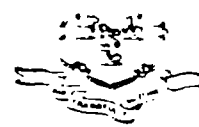
Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
	✓ 03/30/90	330.00		
	06/07/90	110.00		
Maine Poly, Inc.	✓ 06/20/90	100.00	✓	NOT KNOWN
	✓ 07/26/90	495.00	✓	
Just Cabinets, Inc.	✓ 09/10/90	110.00	MEB 030069	S SARA NOTE INCINERABLE DRUM, FLAMMABLE 5110 - SOL STORAGE NOT Processed at SRS.
Roland's Auto Body	✓ 07/26/90	55.00	✓	B M(Guan)
Simpson Paper Company, Centennial Mill	✓ 04/19/90	990.00	✓	B M(Guan)
	✓ 06/13/90	385.00	✓ VT0029109	Item 11C - NON-HAZARDOUS Should not be counted.
	✓ 09/10/90	330.00	✓	
	✓ 09/10/90	110.00	✓ VT0029118	Item 11C Ground Drum NOT HAZARDOUS - Should not be counted.
	✓ 09/10/90	45.00	✓	
	✓ 12/06/90	495.00		
	✓ 12/06/90	220.00	✓ VT0029125	Item 11C Ground Drum NOT HAZARDOUS Should not be counted
Steven Buick-Cadillac	✓ 06/19/90	495.00	✓	NOT KNOWN

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3)	Waste Type (4) [For additional transactions only]
TADCO, Inc.	✓ 01/11/90	85.00 ✓	Manifest MA 0232259	Not Known NM HAZARDOUS WASTE
	✓ 04/06/90	110.00 ✓		
	✓ 04/19/90	100.00 ✓		
	✓ 12/17/90	55.00 ✓	MA 0232259-90	* Non Hazardous Material w/ RCRA -
Tibbets Industries, Inc.	✓ 10/26/90	55.00 ✓		E. McQuinn
Union Butterfield	✓ 06/28/90	220.00 ✓		E. McQuinn
Waters Printing Company	✓ 10/26/90	220.00 ✓		E. McQuinn
Morrison Geotechnical Engineering	✓ 08/17/90	55.00 ✓	Manifest - MGA 030061	NOT HAZARDOUS WASTE SOIL KNOWN INCINERABLE DRUM SO1
Yankee Stripper, The, (Rockport, ME)	✓ 08/30/90	110.00 ✓	Manifest MGA 030063	E. McQuinn FLAMMABLE SOIL INCINERABLE DRUM SO1

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State Office Building, Hartford, CT 06106



PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. 85-D-0487-2-1-207-0-0	Manifest Document No.	2 Page 1 of 1	Information on the shipping areas is not required by Federal law but may be required by State law
GENERATOR'S Name and Mailing Address Carroll Industries, Inc. 166 Mill Street Comey, NH 03818			3 State Manifest Document Number CT B 0082704		
4 GENERATOR'S Phone: 603 447-3403			4 State Gen ID		
5 TRANSPORTER 1 Company Name C.M. Laboratories, Inc.		6 US EPA ID Number ME D 0 9 3 1 7 4 0 4 5		7 State Tran ID ME 261630	
7 TRANSPORTER 2 Company Name		8 US EPA ID Number		8 Tran Phone: 207 772-3689	
9 DESIGNATED FACILITY Name and Site Address Solvents Recovery of New England, Inc. Lazy Lane, Southington, CT 06489		10 US EPA ID Number CT D 0 0 9 7 1 7 5 0 4		9 State Tran ID CT-88-148	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12 Containers		13 Total	
Waste Flammable Solid n.o.s. Flammable Solid UN1325		No. Type		Unit Waste No.	
				p 02.010.4103.004 81 0001	
14 Additional Descriptions for Materials Listed Above FIN 014253-GD		15 Codes for Waste Listed Above			
16 SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL COMMENTS					
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			Signature		
Kevin E. Duggan Sr.			<i>[Signature]</i>		
17 TRANSPORTER 1 Acknowledgement of Receipt of Materials					
Printed/Typed Name			Signature		
Kevin E. Duggan Sr.			<i>[Signature]</i>		
18 TRANSPORTER 2 Acknowledgement of Receipt of Materials					
Printed/Typed Name			Signature		
DISCREPANCY					
19 FACILITY OWNER OR OPERATOR					
Printed/Typed Name			Signature		

GENERATOR'S SIGNATURE AND ADDRESS

CI B UUR 2/10/4



DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333

Please print or type (Form designed for use on 8 1/2 x 11 inch typewriter) Form Approved OMB No. 2050-0038 Expires 6-30-97

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. ME P D O C 4 0 2 7 8 9 8 3	Manifest Department No. 1	Page 1	Signature of the person in charge of the manifest in August, ME and MEA No. 030084
1. Generator's Name and Mailing Address Pioneer Plastics Corporation, Pionite Road Auburn, ME 04210			A. State Manifest Account Number ME A 030084		B. State Generator's ID SAME
4. Generator's Phone: 207 784-9112		C. State Transporter ID ME P 38172		D. Transporter's Phone: 207-583-4395	
5. Transporter 1 Company Name C.M. Laboratories, Inc.		E. EPA ID Number ME P D O C 1 9 7 3 7 6 0 2		E. State Transporter ID	
7. Transporter 2 Company Name		US EPA ID Number		F. State Transporter ID	
9. Designated Facility Name and Site Address Solvent Recovery Service of New England, Inc. Lezy Lane, Southington, CT 06489		US EPA ID Number		G. State Facility's ID P.O. Box 352, Southington, CT	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		H. Facility's Phone 203-421-0033		I. Manifest Codes for Wastes Listed Above	
a. Non Hazardous Waste NONE		NON- CR04		No. Type	
b. RC Waste Flammable Solids n.o.s. Flammable Solid		UN 1325 D001		001 b 00055 c CR04	
c. RC Waste Resin Solution Flammable Liquid		UN 1866 D001, P003		003 b 00165 c D001 P003	
d. RC Waste Resin Solution Flammable Liquid		UN 1866 D001, P003		001 b 00255 c D001 P003	
1. Additional Descriptions for Materials Listed Above		a. Dourthern G		b. Resin (phenol)	
Acetone Polyester Liquid		c. Galled Acetone Resin		TSD Wastewater TSD Wastewater	
12. Special Handling Instructions and Additional Information					
11a. PIN 021406 FD		11c. PIN 020403 FP			
11b. PIN 020791 ID		11d. PIN 020407 DC			
13. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are true and accurate as stated above by proper labeling, 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 lowest level determined to be economically practicable and that I have selected the practicable method of treatment, storage or disposal current practice is the one 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 Name MIKE R RODRIGUEZ		Signature [Signature]		Month Day Year 11 03 90	
14. Transporter 1 Acknowledgement of Receipt of Material		Signature Kevin E. Duran Sr		Month Day Year 11 03 90	
15. Transporter 2 Acknowledgement of Receipt of Material		Signature		Month Day Year	
16. RECEIPTS INDICATOR					
17. Facility Owner or Operator Certification of Receipt of Hazardous Waste					
Printed Name A. R. S. PETERSON		Signature [Signature]		Month Day Year 11 03 90	

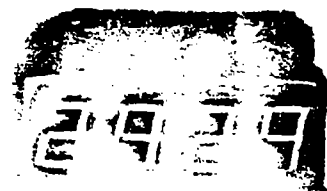
In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8804. For spill within Maine, contact DEP, OH and Hazardous Materials Control at 1-800-482-0777.

HWF COPY

ME A 030084

25 00456

SRP025





STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06116

Please type (or print) (Form designed for use on one (1) 2-page transporter) FOR STATE USE ONLY

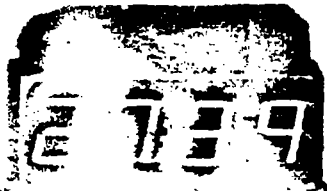
UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. VT D 0 0 3 0 9 2 8 4 3 0	Manifest Number to be assigned by transporter 0 2 0 4	Page: 1 of 2	Information in this manifest is not required to be entered on but may be used for tracking purposes.
Generator's Name and Mailing Address Oleams Division of Ethan Allen, Inc. P.O. Box 205 Oleams, VT 05360			A State manifest identification number CT C 0208604		
Generator's Phone (802) 754-8521			B State DOT ID (See Address)		
Transporter 1 Company Name C.M. Laboratories, Inc.		US EPA ID Number VT D 0 8 3 3 1 2 0 7 4 5	C State DOT ID DE 538171		
Transporter 2 Company Name		US EPA ID Number	D State DOT ID		
Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lary Lane, Southington, CT 06489		US EPA ID Number CT D 0 0 9 7 1 7 5 0 4	E State DOT ID		
US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		F Facility's Phone 203 671 8387			
11 a. Non-Hazardous Non-Regulated Waste Solid Hazard Class: None UN788 Number: None		12 Containers No. Total: 006	13 Total Quantity Net Vol: 03600	14 Waste No. NONE	
Additional Descriptions for Manifest Listed Above #6 fuel oil 2-58 clay absorbent 50-558 dirt, gravel 40-488		G Handling Codes for Waste Listed Above			
15 Special Handling Instructions and Applicable Provisions PIN 015951-GD					
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 air, rail, according to applicable international and national government regulations, and all applicable State and local regulations. If I am a large quantity generator, I certify that I have adopted the best practicable method of transport, storage, or disposal, according to the current requirements of 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 make sure the waste generator and transporter use the best waste management method that is applicable to the product being shipped.					
17 Transporter 1 Acceptance/Signature of Receipt of Manifest Printed Name: Kevin E. Duane Sr Signature: <i>Kevin E. Duane Sr</i> Month Day Year: 10/19/89		18 Transporter 2 Acceptance/Signature of Receipt of Manifest Printed Name: _____ Signature: _____ Month Day Year: _____			
19 Discrepancy Indication Space					
20 Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest under its name in item 15 Printed Name: _____ Signature: _____ Month Day Year: _____		14 02979			

UNIFORM HAZARDOUS WASTE MANIFEST (Form designed for use on one (1) 2-page transporter)

COPY 4

CT C 0208604

SRP025



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

Form 3800 (Rev. 10/90) (Form designed for use on sheets 112, 113, and 114) FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. M.E.D. 2 8 0 6 7 2 4 7 1	2 Manifest ID No. 001	3 Information on the manifest must be required by Federal law but may be required by State law
3 Generator's Name and Mailing Address Maine Dept. of Transportation-Traffic Engineering Div. Transportation Bldg., Augusta, ME 04320		4 Generator's Phone (Area Code) 7153	A State Manifest Document Number CT C 0208635	
5 Transporter 1 Company Name C.V. Laboratories, Inc.		6 US EPA ID Number M.E.D. 0 0 0 1 7 0 9 4 5	B State Gen ID (See Address) Augusta, Maine St George, ME	
7 Transporter 2 Company Name		8 US EPA ID Number	C State Tran ID ME F 33171	
9 Designated Facility Name and Site Address Solvents Recovery Services of New England, Inc. Lazy Lane, Scitunton, CT 06489		10 US EPA ID Number	D Tran Phone 203 772-9409	
			E State Tran ID	
			F Tran Phone ()	
			G State Facility ID	
			H Facility's Phone 203-621-4883	
11 US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12 Containers	13 Total Quantity	14 Unit (Lbs./Vol)
a Hazardous Waste Solid, n.o.s. ORM-B NA 9189		No Type		Waste No.
		006 PM 0A	0610	P HONZ
b RC Waste Flammable Liquid, n.o.s. (F003) Flammable Liquid UN 1993		001 PM 0A	0055	G P005
c RC Waste Flammable Liquid, n.o.s. (F005) Flammable Liquid UN 1993		015 PM 0A	00825	G P005
d RC Waste Flammable Liquid, n.o.s. (F005) Flammable Liquid UN 1993		003 PM 0A	00165	G P005
J Additional Descriptions for Materials Listed Above		K Handling Codes for Wastes Listed Above		
a vinyl plastic and dried paint - white traffic paint		P01		
b yellow traffic paint - talcum/paint		P02		
15 Special Handling Instructions and Additional Information				
11a) PIN 015793-ID c) PIN 015587-ID b) PIN 015592-FD d) PIN 015999-FD		2 drums of PIN 015587-D ARE 85 gallon OVERPACK		
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations. If I am a large quantity generator (as defined in 26 CFR 1.181) 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 available management method that is available to me and that is appropriate.				
Printed Name David M. Hight		Signature David M. Hight		Month Day Year 11/1/68
17 Transporter 1 Acknowledgment of Receipt of Materials				
Printed Name Kevin E. Dean Sr.		Signature Kevin E. Dean Sr.		Month Day Year 11/1/68
18 Transporter 2 Acknowledgment of Receipt of Materials				
Printed Name		Signature		Month Day Year
19 Discrepancy Resolution Space				
20 Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest in accordance with section 19				
Printed Name		Signature		Month Day Year

DO NOT WRITE IN THESE SPACES

COPY 4
CT C 0208635

SRP015

HAZARDOUS MATERIALS MANAGEMENT PROGRAM
 State Office Building
 Montpelier, Vermont 05650

Please print or type (Form designed for use on either 17 inch typewriter) Form Approved OMB No 2000-0494 Expires 7/31/96

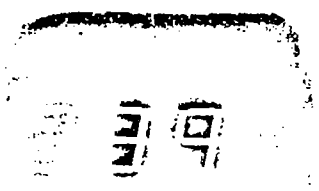
In the event of a spill or release of hazardous materials, the Vermont Department of Public Safety (802) 828-3100 should be contacted immediately.

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No VT D 0 0 1 0 8 1 2 1 5	Manifest Document No 0 0 0 0 1	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
3. Generator's Name and Mailing Address Ethan Allen Inc. Main Street Beecher Falls, Vt. 05902 802-26603355			A. State Manifest Document Number VT0010545		
5. Transporter 1 Company Name C.M. Laboratories			6. US EPA ID Number H.E.D 0 0 3 1 7 9 9 4 5	C. State Transporter's ID ME 261-630	
7. Transporter 2 Company Name R.S. Liquid Waste Disposal			8. US EPA ID Number R.I.D 0 0 0 7 6 9 7 1 1	D. Transporter's Phone 207-772-3689	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. P.O. box 362 Southington, Conn. 06489			10. US EPA ID Number C.T.D 0 0 9 7 1 7 6 0 4	E. State Facility's ID SAME	
			H. Facility's Phone 203-628-0084		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	13. Total Quantity	14. Unit Wt./Vol	15. Waste No.
a. Waste Flammable Solids, NOS Flammable Solids, UN 1325		(C2) 0 0 5	D M 0 2 0 4 0	P	D001
b. Waste Flammable Solids, NOS Flammable Solids, UN 1325		(C4) 0 0 8	D M 0 3 0 0 0	P	D001
c.					
d.					
1. Additional Descriptions for Materials Listed Above a. Lacquer Dust 100% b. Absorbent Clay 85% Lacquer Chips 10% Petroleum Hydrocarbon 5%			K. Handling Codes for Wastes Listed Above		
3. Special Handling Instructions and Additional Information 11a. Pin 015897-SD 11b. Pin 015899-SD			*I am a small quantity generator who has been exempted by statute or regulation from the duty to file a waste manifest or report on under Section 3007(a) of RCRA. I am certain that I have a program in place to manage the waste and I have selected the method of treatment, storage or disposal that is most likely to protect the public and future generations from the environment.		
4. Signature of Generator, Transporter, or Facility Owner/Operator (Print Name, Title, and Date)					
5. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
6. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
7. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
8. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
9. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
10. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
11. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
12. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
13. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
14. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
15. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
16. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
17. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
18. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
19. Signature of Facility Owner/Operator (Print Name, Title, and Date)					
20. Signature of Facility Owner/Operator (Print Name, Title, and Date)					

Copy 4: TSDF Copy

Copy 4: TSDF Copy

SRP025



PLEASE PRINT OR TYPE (if one designed for use on 446112-0001) (Required)

60001

UNIFORM HAZARDOUS WASTE MANIFEST
1. Generator's US EPA ID No. N E D O O L O 3 9 1 3 4
2. Page 1 of 1
3. Information required by Federal law, but required by State law

4. GENERATOR'S Name and Mailing Address
Concord Litho Co., Inc. 92 Old Turnpike Rd. Concord, N.H. 03301
5. GENERATOR'S Phone: 603 225-3328
6. State Manifest Document Number: CT B 0082706
7. State Gen ID

8. TRANSPORTER'S Company Name
C.M. Laboratories
9. US EPA ID Number: N E D O O S 3 1 7 9 9
10. State Gen ID: ME 261530
11. Phone: 207 772-3689

12. TRANSPORTER'S Company Name
13. US EPA ID Number
14. State Gen ID
15. Phone
16. Designated Facility Name and Site Address
Solvents Recovery Service of N.E., Inc. Lazy Lane, Southington, CT 06489
17. US EPA ID Number: CTDD0971760A
18. State Facility ID
19. Phone: 203 772-8084

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		14. Unit No./Type	15. Waste No.
	No.	Type		
Non Hazardous Material Hazard Class: N/A ID Number: N/A	00	S d b	00495	CT 707E

2. Additional Descriptors for Materials Listed Above
washed printing ink FIN014248-DD
3. Special Handling Instructions and Restrictions
Blending Code for Materials Listed Above
TOY BLENDING

4. GENERATOR'S CERTIFICATION
I, the undersigned, certify that the information provided on this manifest is true and accurate and that the waste described herein is being transported in accordance with the requirements of the Resource Conservation and Recovery Act (RCRA) and the regulations promulgated thereunder, and that the waste is being transported in accordance with the requirements of the Department of Transportation (DOT) and the regulations promulgated thereunder. I also certify that the waste is being transported in accordance with the requirements of the State of Connecticut and the regulations promulgated thereunder. I am the owner or operator of the facility and I am responsible for the proper handling and disposal of the waste.

5. TRANSPORTER'S Acknowledgment of Receipt of Materials
Signature: William E Powers Date: 11/7/87

6. TRANSPORTER'S Acknowledgment of Receipt of Waste
Signature: Kevin E Dumas Date: 11/07/87

7. DISCREPANCY (If any)

8. FACILITY OWNER OR OPERATOR
Signature: _____ Date: _____

9. FACILITY OWNER OR OPERATOR
Signature: _____ Date: _____

10. FACILITY OWNER OR OPERATOR
Signature: _____ Date: _____

11. FACILITY OWNER OR OPERATOR
Signature: _____ Date: _____

12. FACILITY OWNER OR OPERATOR
Signature: _____ Date: _____

13. FACILITY OWNER OR OPERATOR
Signature: _____ Date: _____

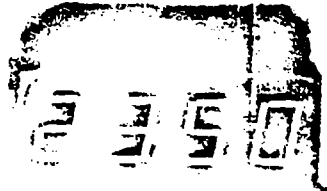
14. FACILITY OWNER OR OPERATOR
Signature: _____ Date: _____

15. FACILITY OWNER OR OPERATOR
Signature: _____ Date: _____

16. FACILITY OWNER OR OPERATOR
Signature: _____ Date: _____

CT B 0082706

SRP025



VERMONT AGENCY OF ENVIRONMENTAL CONSERVATION
HAZARDOUS MATERIALS MANAGEMENT PROGRAM
State Office Building
Montpelier, Vermont 05650

Please print or type (If form designed for use on plate (12 inch) transporter)

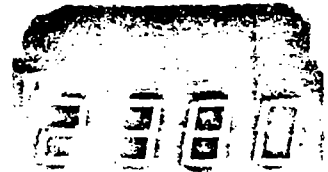
Form Approved OMB No 2000 0404 Expires 7 31 86

In the event of an spill or emergency, call the National Response Center at (800) 424-9312 and if within Vermont, The Vermont Department of Public Safety (802) 828-3100.

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. VT 0016408	Manifest Document No. 041687	2 Page 1 of 1	Information in the shaded area is not required by Federal law
3 HAZARDOUS WASTE FROM: EMERSON, INC. ROUTE 100, ISLAND PLAND, VT 05546		A. State Manifest Document Number VT 0016408		B. State Generator's ID SMW	
4 Generator's Phone (802) 725-4375	5 Transporter 1 Company Name C.M. LABORATORIES, INC.		US EPA ID Number MAZD000031171901010	C. State Transporter's ID DE26162V	D. Transporter's Phone 207-774-2029
7 Transporter 2 Company Name R.S. LIQUID WASTE DISPOSAL, INC.		US EPA ID Number RI D 00001719017111	E. State Transporter's ID		F. Transporter's Phone 401-61-2100
8 Designated Facility Name and Site Address SOLVING'S RECOVERY SERVICE OF NEW ENGLAND, INC. P.O. BOX 550, WASHINGTON, CT 06097		US EPA ID Number MAZD 000031171901010	G. State Facility's ID		H. Facility's Phone 203-678-5554
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit - Wt/Vol
a. WASTE ITERRABLE SOLID, H.O.S. FLAMMABLE SOLID, UNCL			No. Type		L Waste No.
			3 1.5 D	4.5	2 D001
b. WASTE ITERRABLE SOLID, H.O.S. NON-FLAMMABLE SOLID, UNCL			3 1.5 D	4.5	2 D001
c.					
d.					
Special Handling Instructions and Additional Information 1) INHIBIT & SOLUBLE IN OIL, 2) SOLUBLE IN OIL 3) INHIBIT & SOLUBLE IN OIL, 4) SOLUBLE IN OIL 5) INHIBIT & SOLUBLE IN OIL, 6) SOLUBLE IN OIL 7) INHIBIT & SOLUBLE IN OIL, 8) SOLUBLE IN OIL			A. Manifest Code for Waste Disposal Code 001 001		
9. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this assignment are... and accurately described above by proper shipping name and are classified, packed, marked, and labeled and are in as good condition for transport as required by applicable international and national government regulations.					
10. 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 most appropriate 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 the waste generated and used the best waste management method that is available to me and that can be used.					
11. Signature of Generator ROBERT T. DANIELS		Signature <i>Robert T. Daniels</i>		Month Day Year 04/16/87	
12. Signature of Transporter KEVIN E. DUEHN SR.		Signature <i>Kevin E. Duehn Sr.</i>		Month Day Year 04/16/87	
13. Discrepancy Indication Code		13 00963			
14. If I am the owner or operator, I certify that I have received a copy of this manifest and agree to comply with the requirements of this manifest.					
Signature of Owner/Operator <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year 04/16/87	

EPA Form 8700-22 (10 85)

SRP025



Copy A TSD Form

V1 U016408



COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF ENVIRONMENTAL QUALITY ENGINEERING
DIVISION OF SOLID AND HAZARDOUS WASTE
One Winter Street
Boston, Massachusetts 02109

Please print or type. (Form designed for use on size 11 1/2-inch typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator US EPA ID No. MA D 0 6 1 2 1 0 0 4 0 1 0 0 0	Manifest Document No. 10000	2. Page 1 of 1	Information on the enclosed pages is not required by Federal law.
3. Generator's Name and Mailing Address Dason Clinical Laboratories, Inc. 82 Wilbrahams Westwood, Massachusetts				4. State Uniform Document Number MA C23230b	
4. Generator's Phone 617-329-4800		5. US EPA ID Number MA D 0 6 1 2 1 0 0 4 0 1 0 0 0		6. State Facility ID ME 638172	
5. Transporter's Company Name C.M. Laboratories, Inc.		6. US EPA ID Number		7. Transporter's Phone 207-772-9399	
7. Transporter's Company Name		8. US EPA ID Number		8. State Facility ID	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Larry Lane Southington Ct. 06489				9. US EPA ID Number	
10. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) NO Waste Plammable Liquid n.o.s. UN 1993 Flammable Liquid (7003)				11. Containers	
				12. Total Quantity	
				13. Jugs	
				14. Other	
				15. Waste No.	
				16. Date	
17. Additional Comments for Generator (including Material Safety Data Sheet and other data and hazard codes)				18. State Uniform Document Number	
Spent Lab Chemicals				TSP	
19. Special Handling Instructions and Additional Information II a. PIN 020703 PD					
20. Generator's Certification (I hereby declare that the contents of this manifest are true and accurate and that I am not a transporter or a person in possession of a manifest for transport to another state or foreign country.)					
Approved/Typed Name KAREN RITE CLICARD		Signature		Date 10/02/90	
Approved/Typed Name KEVIN E. DUNN SR		Signature		Date 10/02/90	
Approved/Typed Name		Signature		Date	
21. Consignee's Acknowledgment (Signatures and Date)					
Approved/Typed Name Allan B. P. [unclear]		Signature		Date 10/06/90	
22. Facility Owner or Operator Certification (I certify that the hazardous materials covered by this manifest are as noted on Form 19.)					
Approved/Typed Name		Signature		Date	

In case of emergency or spill, immediately call the National Response Center (800) 424-0012.

Form Approved JWS No. 0750-0039-1000 Rev. 10-89
EPA Form 6700-22 (Rev. 9-88) Previous editions are obsolete.

COPY 2: TSP-RETAINED BY TSP

25 00364

SRP025





DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on other (12-G)CM typewriter.)

Form Approved OMB No. 2080-0038 Expires 6-30-81

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. ME P 000006581	Manifest Document ID 7	Page of 1	Number in the manifest does not include the Federal one but may be required by State law.
1. Generator's Name and Mailing Address Bangor Hydro Electric Company 33 State Street Bangor, Maine 04401		A. State Manifest Document Number MEA 030033		B. State Generator's ID Davenport Street Milford.	
4. Generator's Phone: 207 945 4621 X 334		6. US EPA ID Number ME.D.98546761		C. State Transporter's ID 01157372	
5. Transporter 1 Company Name C.P. Laboratories, Inc.		7. US EPA ID Number		D. Transporter's Phone 233 8395	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Ledy Lane Southington, Ct. 06485		10. US EPA ID Number		G. State Facility's ID P.O. Box 8002 Southington,	
		11. Facility's Phone 203 621 8793			
11. US DOT Description including Proper Shipping Name, Hazard Class, and ID Number		12. Commodity		13. Total Quantity	
a. NO Waste Combustible Liquid n.o.s. (D001) Combustible Liquid		No. Type		14. Unit Weight	
		15. Waste No.			
b. Waste Flammable Liquid n.o.s. (D001) Flammable Liquid		006 D,M 001/85 G		006 001	
c.		003 D,M 001/50 G		003 001	
d.					
14. Additional Descriptions for Materials Listed Above		a. Roofing Tar		b. Gas Oil Diesel Fuel	
		c.		15. Handling Codes for Vessels TEO	
15. Special Handling Instructions and Additional Information 12 a. FIN F 021439 FD 11 b. UTR F 021438 FD		16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described as name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway, air, water, 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 be economically practiced, and that I have selected the practicable method of treatment, storage, or disposal that minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I am going to minimize the waste generated and select the best waste management method that is available to me and that			
Printed Name Christian R. Ruffolo		Signature <i>CHRISTIAN RUFFOLO</i>		Date 08/13/90	
17. Transporter 1 Acknowledgment of Receipt of Materials Printed Name KEVIN E. DEHN JR		Signature <i>Kevin E. Dehn Jr</i>		Date 08/13/90	
18. Transporter 2 Acknowledgment of Receipt of Materials Printed Name		Signature		Date	
19. State of Origin of Waste		20. Facility Owner or Operator Certification of Receipt of Hazardous Materials Covered by this Manifest except as noted in item 15 7770 PETERSON			
		Signature <i>WILL B. PETERSON</i>		Date 08/17/90	

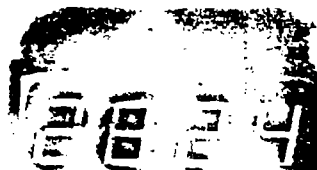
In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-482-0777.

HAZ COPY

MEAU0003

25 00163

SRP025





STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building
 Hartford, CT 06106

Form 3800 (or 3810) (Form designed for use on other (12) month intervals) FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No ME X 0 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Manifest or 1		2 Page 1	
3 Generator's Name and Mailing Address Plaza Realty Company P.O. Box 595 One Canal Plaza Portland, ME 04112				A State manifest Document Number CT C 0208617			
4 Generator's Phone (207) 773-5156				B State Gen ID (See Appendix)			
5 Generator 1 Company Name C.M. Laboratories, Inc.		6 US EPA ID Number ME D 0 8 3 1 7 9 9 4 5		C State Tran ID ME F 3 8 1 7 0 7		D Tran Phone (207) 772-3689	
7 Generator 2 Company Name		8 US EPA ID Number		E State Tran ID		F Tran Phone	
9 Shipper's Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lezy Lane, Southington, CT 06489				G State Facility ID			
10 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) RD Hazardous Waste Liquid, n.o.s. (P002) ORM-A NA 9189				12 Containers No. Type		13 Total Quantity	
				14 Unit (See Vol)		15 Waste No.	
				001 PH 00055 G		P002	
16 Accidental Descriptors for Materials Listed Above frason/oil mixture				17 Material Codes for Waste Listed Above			
18 Special Handling Instructions and Additional Information FIS 017021-CD							
19 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this assignment are true and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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 or technically feasible 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 hereby declare a good faith effort to manage my waste generation and spend the best available management method available to me in the reduction of waste.							
20 Generator 1 Acknowledgment of Receipt of Materials David DiCenso				Signature David DiCenso		Month Day Year 100000	
21 Generator 2 Acknowledgment of Receipt of Materials Kevin F. D'Amico Sr				Signature Kevin F. D'Amico Sr		Month Day Year 100000	
22 Shipper's Acknowledgment of Receipt of Materials							
23 Shipper's Acknowledgment of Receipt of Materials							

COPY 4

CT C 0208617

SRP025 **147**

STATE OF CONNECTICUT DEPARTMENT OF ENVIRONMENTAL PROTECTION Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106



type. (Form designed for use on elite (12-pitch) typewriter)

UNIFORM HAZARDOUS WASTE MANIFEST form with sections for Generator, Transporter, Facility, and waste description. Includes fields for EPA ID numbers, manifest number, and signatures.

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125381

GENERATOR

TRANSPORTER

FACILITY

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No ME X 0 2 0 0 - 0 0 0 0 5 9	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.		
3 Generator's Name and Mailing Address The Montauco Corp. 200 Riverside Industrial Parkway Portland, ME 04103				A. State Manifest Document Number CT C 0125380			
4 Generator's Phone (207) 797-8710		6 US EPA ID Number ME D 0 8 3 3 7 9 0 4 5		C. State Tran. ID ME F 3 8 1 1 1		D. Tran. Phone 207 772-3009	
5 Transporter 1 Company Name C.M. Laboratories, Inc.		8 US EPA ID Number		E. State Tran. ID		F. Tran. Phone ()	
7 Transporter 2 Company Name		10 US EPA ID Number CT D 0 3 3 7 1 7 6 0 4		G. State Facility's ID		H. Facility's Phone 203-621-4383	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England Inc. Lazy Lane, Southington, CT 06489							
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12 Containers	13 Total Quantity	14 Unit Wt./Vol	15 Waste No.
a. Hazardous Waste Liquid, n.o.s. OSM-A NA9189				No	Type		
				00	000005		NONE
b. RC Waste Combustible Liquid, n.o.s. (EPA Ignitability) Combustible Material NA1993				00	000053		D 0 0 1
c. RC Hazardous Waste Liquid, n.o.s. (F001) OSM-A NA9189				00	000020		F 0 0 1
d. RC Waste Ammonium Hydroxide (EPA Corrosivity) Corrosive Material NA2672				00	000002		D 0 0 2
J. Additional Descriptions for Materials Listed Above. contains water, latex emulsion, pigments, fillers (99%, 15%, 5%), contains 30% enamel and thinnner, 1,1 and 70% petroleum oil				K. Handling Codes for Wastes Listed Above			
contains perchloroethylene 20%, methylene chloride 40%, 1,1 Trichloroethane 30%, solids (waxes and resins) 10%							
15 Special Handling Instructions and Additional Information: 11a) PIN015440-AD b) PIN015301-AD c) PIN015433-AD				contains 40% water, 60% ammonium hydroxide			
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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		Signature		Month		Day Year	
<i>[Signature]</i>		<i>[Signature]</i>		02		1989	
17 Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name		Signature	
				<i>[Signature]</i>		<i>[Signature]</i>	
18 Transporter 2 Acknowledgement of Receipt of Materials				Printed/Typed Name		Signature	
				<i>[Signature]</i>		<i>[Signature]</i>	
19 Discrepancy Indication: space							
20 Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 9							
Printed/Typed Name		Signature		Month		Day Year	

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3338
IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER U.S. COAST GUARD 1-800-424-8802

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125380



VERMONT AGENCY OF ENVIRONMENTAL CONSERVATION
 HAZARDOUS WASTE MANAGEMENT PROGRAM
 West Building, 103 South Main Street
 Waterbury, Vermont 05676
 (802)244-9702

Please print or type (Form designed for use on elite 12-pitch typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. VT 2 01010 0 0 11 7 10 10 14 5		Manifest Document No. 117 1 1 1 1	2. Page 1 of	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address The Little Press, Inc. P.O. Box 130 Burlington, VT 05402 302 485-5555				A. State Manifest Document Number VT 0022354		B. State Generator's ID 1000 Nilesburg Road	
4. Generator's Phone ()		5. Transporter 1 Company Name C.S. Laboratories		6. US EPA ID Number 11 12 10 13 13 11 7 10 10 14 5		C. State Transporter's ID ME F38171	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (207) 772-3689		E. State Transporter's ID	
9. Designated Facility Name and Site Address Soltech Recovery Services, New England, Inc. 1000 Nilesburg Road Southington, CT 06489				10. US EPA ID Number 10 12 10 10 10 17 11 7 10 10 14		F. Transporter's Phone	
				G. State Facility's ID		H. Facility's Phone (203) 621-8363	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. RQ Combustible Liquid Waste Inc (UN1205) (EPA Ignitability)				9	3M	14 1 4 10 15	D001 VT06
b. Gas Flammable Liquid Waste Inc (UN1205) (EPA Ignitability)				14	D	1 1 4 10 15	D001 VT02
c.							
d.							
15. Additional Descriptions for Materials Listed Above a. PIN 15017-FD				K. Handling Codes for Wastes Listed Above			
Contains aromatic, aliphatic solvents, polyglycol ethers				b. 15040-FD			
16. Special handling instructions and additional information INERTIA PROGRAM				c.			
17. GENERATOR'S CERTIFICATION. I hereby declare that the contents of this manifest are true and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable state law and regulations. I am a large quantity generator (entity that have a program in place to reduce the amount of waste generated to the degree I have determined to be economically practicable and that I have selected the most appropriate treatment, storage and disposal currently available to me which minimizes the present and future threat to human health and the environment. OR I am a small quantity generator. I have made 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.				d.			
Printed/Typed Name: _____ Signature: _____ Month Day Year: _____							
18. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name: Kevin E. Duran Sr Signature: Kevin E Duran Sr Month Day Year: 03/10/88							
19. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name: _____ Signature: _____ Month Day Year: _____							
20. Facility Owner or Operator Certification of Receipt of Hazardous Materials Covered by this Manifest Except as noted in item 19 Printed/Typed Name: _____ Signature: _____ Month Day Year: _____							

Copy 5: Transporter 1

VT UUC7C004

In the event of spill or emergency, contact the nearest Response Center 1-800-424-8802 and if within Vermont, The Vermont Department of Public Safety 1-800-641-5000

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3338
IN THE EVENT OF AN EMERGENCY, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1 800 474-8802

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. ME D 9 8 1 1 0 7 2 8 0 4 0 0 0 0 1	Manifest Document No. 0122548	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
3 Generator's Name and Mailing Address Arrow Hart, Division of Cooper Industries 1 Grassov Rd. Brunswick, ME 04011			A. State Manifest Document Number CT C 0122548		
4 Generator's Phone 1 207 1729-6734			B. State Gen ID SAME		
5 Transporter 1 Company Name C.H. Laboratories, Inc.		6. US EPA ID Number ME D 0 8 3 1 7 9 9 4 5		C. State Trans ID ME F 38172	
7 Transporter 2 Company Name		8 US EPA ID Number		D. Tran. Phone 207 333-2007	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lary Lane Southington, CT 06489		10. US EPA ID Number CT D 0 0 9 7 1 7 6 9 4		E. State Trans ID 003-8395	
				F. Tran. Phone	
				G. State Facility PO BOX 362 Southington, Ct.	
				H. Facility 003-8395	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt./Vol
a Hazardous Waste, Solid n.o.s., OXK-R, 249189			No.	Type	1. Waste No.
J Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a Nickel filters from plating operation.			a S01		
b			b		
c			c		
d			d		
15 Special Handling Instructions and Additional Information 11a) PIN 120015-1D					
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations. I am a large quantity generator. I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name [Signature]		Signature [Signature]		Month Day Year 01/16/90	
17 Transporter 1 Acknowledgement of Receipt of Materials					
Printed/Typed Name Kevin E. Dusek		Signature [Signature]		Month Day Year 01/16/90	
18 Transporter 2 Acknowledgement of Receipt of Materials					
Printed/Typed Name [Signature]		Signature [Signature]		Month Day Year [Signature]	
19 Discrepancy Indication Space					
20 Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19					
Printed/Typed Name [Signature]		Signature [Signature]		Month Day Year [Signature]	

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0122548



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-91

TRANSPORTER COPY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. [Handwritten]		Manifest Document No. [Handwritten]	2. Page 1 of [Handwritten]	Information in the shaded areas is not required by Federal law but may be required by State Law.	
3. Generator's Name and Mailing Address Arrow Matt Division of Dover Industries, Inc. 1 Progress Ave. Brunswick, Maine					A. State Manifest Document Number ME A 079977		
4. Generator's Phone (207) 729-1473					B. State Generator's ID [Handwritten]		
5. Transporter 1 Company Name S.A. Laboratories, Inc.			6. US EPA ID Number [Handwritten]		C. State Transporter ID ME F38172		
7. Transporter 2 Company Name					D. Transporter's Phone 207 883 8395		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane Southington, CT.					E. State Transporter's ID [Handwritten]		
					F. Transporter's Phone [Handwritten]		
10. US EPA ID Number [Handwritten]					G. State Facility ID [Handwritten]		
					H. Facility's Phone [Handwritten]		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)					12. Containers		13. Total Quantity
					No.	Type	Unit
a. Non-hazardous waste Non-hazardous					008		00350
J. Additional Descriptions for Materials Listed Above					K. Handling Codes for Wastes Listed Above		
a. Waste Oil					T30		
15. Special Handling Instructions and Additional Information							
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				Signature		Month Day Year	
[Handwritten]				[Handwritten]		03 22 90	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature		Date	
Printed/Typed Name				Signature		Month Day Year	
[Handwritten]				[Handwritten]		03 22 90	
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature		Date	
Printed/Typed Name				Signature		Month Day Year	
[Handwritten]				[Handwritten]		[Handwritten]	
19. Discrepancy Indication (If any)							
20. Facility, Owner or Operator Certifies that the hazardous materials covered by this manifest receipt as noted in item 11							
Printed/Typed Name				Signature		Month Day Year	
[Handwritten]				[Handwritten]		[Handwritten]	

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. In Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-877-7777.

GENERATOR

TRANSPORTER

FACILITY

ME A 079977

Previous editions are obsolete.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. VT0001081315	Manifest Document No. 000001	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address ETHAN ALLEN FUEL MONTPELIER VT 05602 DEPT OF TRANSPORTATION				A. State Manifest Document Number VT 0010548				
4. Generator's Phone (802) 261-3351				B. State Generator's ID SAME				
5. Transporter 1 Company Name C.M. LABORATORIES		6. US EPA ID Number ME000317795		C. State Transporter's ID ME 261-630		D. Transporter's Phone 603-772-3684		
7. Transporter 2 Company Name R.S. LINDSAY WHITE LABORATORY		8. US EPA ID Number VT00070761711		E. State Transporter's ID		F. Transporter's Phone 504-461-2200		
9. Designated Facility Name and Site Address SOLVENT RECOVERY SERVICE OF NEW ENGLAND PO BOX 342 SCOTTSDALE, VERMONT 05154				10. US EPA ID Number VT0009717604		G. State Facility's ID SAME		
				H. Facility's Phone 203-628-8094				
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)					12. Containers	13. Total Quantity	14. Unit Mt/Vol	I. Waste No.
a. WASTE FLAMMABLE SOLIDS, LIQ FLAMMABLE SOLIDS UN1205 (10)					008 AM	03361	P	0001
b. WASTE FLAMMABLE SOLIDS, LIQ FLAMMABLE SOLIDS UN1205 (10)					006 AM	02700	P	0001
c.								
d.								
J. Additional Descriptions for Materials Listed Above a. LACQUEL DUST 100% b. ABSORBENT CLAY 90% LACQUEL DUST 10% PETROLEUM OIL 10%				K. Handling Codes for Wastes Listed Above				
L. Special Handling Instructions and Additional Information								
M. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest have been accurately described above by proper shipping name and are classified, packed, marked, and labeled in compliance with all applicable conditions for transport by highway according to applicable international and national governmental regulations, and all applicable State laws and regulations.								
Printed/Typed Name Ethan Allen Fuel				Signature [Signature]		Date 10/01/87		
N. Transporter 1 Acknowledgement: Receipt of materials				Date				
Printed/Typed Name Kevin E. Dean Sr.				Signature [Signature]		Date 04/01/87		
O. Transporter 2 Acknowledgement: Receipt of materials				Date				
Printed/Typed Name				Signature		Date		
P. Discrepancy Indication Space								
Q. Facility Owner or Operator Certification: I hereby certify that the information reported on this manifest is true and correct as noted on Form 9.								
Printed/Typed Name				Signature		Date		

Copy 5: Transporter 1

VTUUL00410

HAZARDOUS MATERIALS MANAGEMENT PROGRAM
State Office Building
Montpelier, Vermont 05650

Please print or type (Form designed for use on white (12 pitch) typewriter)

Form Approved OMB No 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No V T D 0 0 1 0 8 1 2 1 5		Manifest Document No 0 0 0 0 1		2 Page 1 of 1		Information in the shaded areas is not required by Federal law			
Generator's Name and Mailing Address Ethan Allen Inc. Main Street Beecher Falls, Vt. 05902 Generator's Phone (802) 266-3355						A.State Manifest Document Number VT 0010544					
5. Transporter 1 Company Name C.M. Laboratories						6. US EPA ID Number M E D 0 0 3 1 7 9 9 4 5		C.State Transporter's ID ME 261-630			
7. Transporter 2 Company Name R.S. Liquid Waste Disposal, Inc.						8. US EPA ID Number R I D 0 0 0 7 6 9 7 1 1		D.Transporter's Phone 207-772-3689			
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. P.O. Box 362 Southington, Conn. 06489						10. US EPA ID Number I C T D 0 0 9 7 1 7 6 0 4		E.State Transporter's ID SAME			
								F.Transporter's Phone 401-461-2030			
								G.State Facility's ID SAME			
								H.Facility's Phone 203-628-8084			
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Mt/Vol	1. Waste No.
a. Waste Flammable Solids, NOS Flammable Solids, UN 1325						(C2) 0 1 0 D M 0 4 0 8 0		P		D001	
b. Waste Flammable Solids, NOS Flammable Solids, UN 1325						(C6) 0 0 7 D M 0 2 8 5 6		P		D001	
c. Waste Flammable Solids, NOS Flammable Solids, UN 1325						(C4) 0 1 5 D M 0 6 7 5 0		P		D001	
d.											
Additional Descriptions for Materials Listed Above a. Lacquer Dust 100% b. Paint Booth Filters 90% Lacquer Dust 10% c. Absorbent Clay 85% Lacquer Chips 10% Petroleum Hydrocarbon 5%						K.Handling Codes for Wastes Listed Above					
15. Special Handling Instructions and Additional Information 11a. PIN 013897-GD 11b. PIN 013898-GD 11c. PIN 013899-GD						"Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also 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 I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment."					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and all applicable State laws and regulations.						Printed/Typed Name Brendon I. Cote		Signature <i>Brendon I. Cote</i>		Date Month Day Year 0 1 0 7 1 8 7	
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name Kevin E. Duran Sr		Signature <i>Kevin E. Duran Sr</i>		Date Month Day Year 1 0 1 0 7 1 8 7	
18. Transporter 2 Acknowledgement or 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	

Copy 1: Destination State-Mailed by TSDf

V T D 0 0 4

In the event of a spill or emergency, contact the National Response Center 1-800-424-8802 and if within Vermont, the Vermont Department of Public Safety 1-800-245-7353

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State Office Building, Hartford, CT 06106



PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. 39-004-87-2-9-2-1-20-0-0-1		Manifest Document No. 0-0-0-1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State law			
		GENERATOR'S Name and Mailing Address Carroll Industries, Inc. 166 Mill Street Conway, NH 03818		6. US EPA ID Number MSD093279945		C. State Tran ID NR 201630		A. State Manifest Document Number CT B 0082704		B. State Gen. ID	
4. GENERATOR'S Phone: 603 247-5403		5. TRANSPORTER 1 Company Name C.M. Laboratories, Inc.		8. US EPA ID Number		D. Tran Phone: 207 772-2009		E. State Tran ID		F. Tran Phone	
7. DESIGNATED FACILITY Name and Site Address Solvents Recovery of New England, Inc. Lazy Lane, Southington, CT 06489		10. US EPA ID Number CTD009717604		G. State Facility's ID CT-11-148		H. Facility's Phone: 203 628-8084					
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total		14. Unit	
						No	Type	Quantity	Wt./Vol	Waste No.	
Waste Flammable Solid n.o.s. Flammable Solid UN1225						02		DM		0300	
						02		DM		0300	
15. UN Identification Number PN 014252-02						K. Handling Codes for Wastes Listed Above					
SPECIAL HANDLING											
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				Signature				Month Day Year			
TRANSPORTER				<i>[Signature]</i>				11 1987			
Printed/Typed Name				Signature				Month Day Year			
TRANSPORTER				<i>[Signature]</i>				11 1987			
Printed/Typed Name				Signature				Month Day Year			
DISPERMAN				<i>[Signature]</i>				11 1987			
Printed/Typed Name				Signature				Month Day Year			
DISPERMAN				<i>[Signature]</i>				11 1987			

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

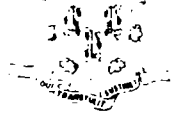
FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No HD00108918400001	Manifest Document No	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law		
Generator's Name and Mailing Address Concord Litho Co., Inc. 92 Old Turnpike Rd., Concord, NH 03301		A. State Manifest Document Number CTC 0208618		B. State Code (See instructions)			
3 Generator's Phone 603 225-3328	4. Transporter 1 Company Name C.M. Laboratories, Inc.	5. US EPA ID Number ME D 083179945	6. State Telephone 603 225-3328	D. Tran. Phone			
7. Transporter 2 Company Name		8. US EPA ID Number	E. State Telephone				
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10. US EPA ID Number CTD009717604	G. State Facility's ID				
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	13. Total Quantity	14. Unit Wt./Vol	1. Waste No.		
a. Non Hazardous Material Hazard Class: N/A UN/NA Number: N/A		009	D 495	G	NONE		
15. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above					
a. crushed printing ink		a.					
b.		b.					
16. Special Handling Instructions and Additional Information Mat: UT: 014248-DD							
17. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.							
I, the undersigned, generator, 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 I have selected the waste management method that is available to me and that I can afford.							
Printed/Typed Name WILLIAM E BOWERS		Signature <i>William E Bowers</i>		Month Day Year 10 20 88			
18. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name KEVIN E DURAN JR		Signature <i>Kevin E Duran Jr</i>		Month Day Year 10 20 88			
19. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name JH		Signature		Month Day Year			
20. Discrepancy Indication Space							
21. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19							
Printed/Typed Name		Signature		Month Day Year			

COPY 5

CT C 0208618

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No WH D 0 0 1 0 3 9 1 8 4	Manifest Document No.	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law
Generator's Name and Mailing Address Concord Litho Company, Inc. 92 Old Turnpike Road Concord, New Hampshire 03301			A. State Manifest Document Number CT C 0125379		
4 Generator's Phone 603 225 1328	5 Transporter 1 Company Name C.M. Laboratories, Inc.	6 US EPA ID Number MS D 0 8 2 1 7 9 9 4 5	C. State Facility ID 010 0 0 0 5 5 0		
7 Transporter 2 Company Name	8 US EPA ID Number	D. Train Phase			
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington CT 06489		10 US EPA ID Number 1 0 1 0 0 9 7 1 7 6 9		G. State Facility's ID	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12 Containers No.	13 Total Quantity	14 Unit Wt/Vol	Waste No.
a. Non Hazardous Material Hazard Class 5/A ID Number: N/A			010 0 0 0 5 5 0		
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
a. Shaded Printing Ink P/N 814240-10		a. TC4 b. Disinfectant			
15 Special Handling Instructions and Additional Information					
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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 WILLIAM BUEERS		Signature <i>[Signature]</i>		Month Day Year 03 11 88	
17 Transporter 1 Acknowledgement of Receipt of Materials					
Printed/Typed Name Kevin E. Quinn Sr		Signature <i>[Signature]</i>		Month Day Year 03 11 88	
18 Transporter 2 Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		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		Month Day Year	

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125379

DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No EH000108918400000	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law
3 Generator's Name and Mailing Address Concord Litho Co., Inc. 92 Old Turnpike Rd., Concord, NH 03301		6 US EPA ID Number NE0083179965		5 State Manifest Document Number CTC0125376	
4 Generator's Phone (603) 225-3328		7 Transporter 2 Company Name		8 US EPA ID Number	
5 Transporter 1 Company Name C.M. Laboratories, Inc.		6 US EPA ID Number		7 State Manifest Document Number	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10 US EPA ID Number CTD069717604		11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12 Containers No.	13 Total Quantity	14 Unit Wt/Vol	15 Additional Descriptions for Materials Listed Above
a Non Hazardous Material Hazard Class: N/A N/A Number: N/A		004	99220 G		unmixed printing ink
b					
c					
d					
15 Special Handling Instructions and Additional Information UN 014248-00		16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.		17 Transporter 1 Acknowledgement of Receipt of Materials	
16 GENERATOR'S CERTIFICATION: 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.		17 Transporter 1 Signature <i>[Signature]</i>		17 Month Day Year 10/10/78	
17 Transporter 1 Acknowledgement of Receipt of Materials		18 Transporter 2 Acknowledgement of Receipt of Materials		19 Discrepancy Indication Space	
17 Transporter 1 Printed/Typed Name Kevin E. Quinn		18 Transporter 2 Printed/Typed Name		19 Discrepancy Indication Space	
17 Transporter 1 Signature <i>[Signature]</i>		18 Transporter 2 Signature <i>[Signature]</i>		19 Discrepancy Indication Space	
17 Transporter 1 Month Day Year 10/10/78		18 Transporter 2 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		20 Facility Owner or Operator Printed/Typed Name		20 Facility Owner or Operator Signature	
20 Facility Owner or Operator Printed/Typed Name		20 Facility Owner or Operator Signature		20 Facility Owner or Operator Month Day Year	

FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1-800-424-8802

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125376



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12 pitch) typewriter) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME D 0 0 1 1 1 1 1 0 3 9 0 0 0		Manifest Document No. 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.				
3. Generator's Name and Mailing Address Costar Corp. Alarive Road Ramebank, ME 04043						A. State Manifest Document Number ME A 013312						
4. Generator's Phone (207) 985-3111						B. State Generator's ID						
5. Transporter 1 Company Name C.M. Laboratories, Inc.				6. US EPA ID Number ME D 0 8 3 1 7 9 9 4		C. State Transporter's ID ME F 58171						
7. Transporter 2 Company Name						D. Transporter's Phone 207-772-3689						
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489						E. State Transporter's ID						
10. US EPA ID Number CT D 0 0 9 7 1 7 6 9						F. Transporter's Phone						
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity	14. Unit Wt/Vol	15. Waste No.		
a. RC Waste Flammable Liquid, n.o.s. (F003) Flammable Liquid UN 1993 b. c. d.						No.		Type		Quantity	Unit Wt/Vol	Waste No.
						001		D		4000	L	F003
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above						
a. acetone 36-508 b. nitrocellulose 50-708 c. d.						a. b. c. d.						
15. Special Handling Instructions and Additional Information PIN 015790-ID												
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 EARL TRACY				Signature <i>[Signature]</i>		Month Day Year 11 09 88						
17. Transporter 1 Acknowledgement of Receipt of Materials												
Printed/Typed Name KEVIN E DEAN				Signature <i>[Signature]</i>		Month Day Year 11 09 88						
18. Transporter 2 Acknowledgement of Receipt of Materials												
Printed/Typed Name				Signature		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		Month Day Year						

TRANSPORTER COPY

ME A 013312

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-377-7777.

DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.) FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. V T D 0 0 1 0 8 1 2 1 5 0 0 0 0	Manifest Document No. 00001	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
Generator's Name and Mailing Address Beecher Falls Division of Ethan Allen, Inc. Main St. P.O. Box 217 Beecher Falls, VT 05902				A. State Manifest Document Number CT C 0208634	
4. Generator's Phone 302 266-3355	5. Transporter 1 Company Name C.M. Laboratories, Inc.	6. US EPA ID Number ME D 0 8 3 1 7 9 9 4 5	B. State Facility's ID CT C 0208634		
7. Transporter 2 Company Name	8. US EPA ID Number	D. Tran. Phone 717 3689			
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10. US EPA ID Number C.T.D.0.0.9.7.1.7.6.0.4	E. State Facility's ID CT C 0208634		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	13. Total Quantity	14. Unit Wt./Vol.	15. Waste No.
a. RC Waste Flammable Liquid, n.o.s. (F003, F005) Flammable Liquid UN 1993		002	D.M.O.0110G		F003 F005
Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
a. contains dissolved styrofoam, cellulose nitrate, xylene, MEK, toluene, butyl acetate, etc.					
16. Special Handling Instructions and Additional Information 11a) RC 215993-cD Stream C1F					
GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, hazard class, hazard label, hazard marking, and are in all respects in proper condition for transport by highway, air, rail, water, or other mode of transportation, and all applicable State laws and regulations.					
I certify that the generator, transporter, or receiver that have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be prudent, and that I am a small quantity generator, I have made a good faith effort to minimize my waste generation and disposal, and that the program is available to me and that I can afford it.					
Transporter 1 Acknowledgment of Receipt of Materials		Signature Brendon I. Cote		Month Day Year 11-12-1988	
Printed Typed Name Kevin E. Duran		Signature Kevin E. Duran		Month Day Year 11-12-1988	
Transporter 2 Acknowledgment of Receipt of Materials		Signature		Month Day Year	
Printed Typed Name		Signature		Month Day Year	
17. Description of Receipt of Consignment					
18. Receiver's Operator Acknowledgment of Receipt of hazardous materials covered by this manifest except as noted in item 16					
Printed Typed Name		Signature		Month Day Year	

COPY 5

CT C 0208634

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3308

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No ME X 0 2 0 0 0 0 0 0 0 0 0 0 0 1	Manifest Document No 000001	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law	
Generator's Name and Mailing Address Defence Mapping Co. P.O. Box 298 Freeport, ME 04032				A. State Manifest Document Number CTC 0125384		
4. Generator's Phone (207) 365-4171	6. US EPA ID Number ME D 0 8 3 1 7 9 9 4 5		B. State Facility ID CT D G 0 9 7 1 7 6 0 4			
5. Transporter 1 Company Name C.A. Laboratories, Inc.	8. US EPA ID Number		C. State Facility ID			
7. Transporter 2 Company Name	10. US EPA ID Number		D. State Facility ID			
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				E. State Facility ID		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
a. Hazardous Waste Liquid, n.o.s. ORM-E NA9189		003	DM	00165	G	0000
b. Hazardous Waste Liquid, n.o.s. ORM-E NA9189		002	DM	00110	G	0000
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
a. waste photo developer		T04				
b. waste photo film		S1, D1, L1, M1, W1, X1, Y1, Z1				
15. Special Handling Instructions and Additional Information 11a) P/N 15302-AD 11b) P/N 15303-AD						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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 MATTHEW SORNA		Signature <i>Matthew Sorna</i>		Month Day Year 10 31 98		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Kevin E. Dumas		Signature <i>Kevin E. Dumas</i>		Month Day Year 10 31 98		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indicator 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 Matthew Sorna						
Printed/Typed Name		Signature		Month Day Year		

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER U.S. COAST GUARD 1 800 424 8802

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125384

DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP., OIL AND CHEMICAL SPILLS AT (203) 566-3338
 IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1 800 424 8802

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME D 0 9 1 0 9 7 5 2 6 0 9 7 0 1	Manifest of 1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law.
Generator's Name and Mailing Address Wurster Manufacturing Co. Depot St., Wilton, ME 04294			A. State Manifest Document Number CT C 0125392		
4. Generator's Phone (207) 645-2574	5. Transporter 1 Company Name C.N. Laboratories, Inc.		6. US EPA ID Number ME D 0 8 3 1 7 9 9 4 5	B. State Facility's ID CT D 0 0 9 7 1 7 5 0 4	
7. Transporter 2 Company Name		8. US EPA ID Number		C. State Facility's ID	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Scarthington, CT 06489			10. US EPA ID Number CT D 0 0 9 7 1 7 5 0 4		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit	15. Waste No.
a. Hazardous Waste Liquid, n.o.s. ORM-B NA 9189		No. 021	Type DM	01/55	G
b.					
c.					
d.					
Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a. water reducible coating, 70-80%			a.		
b. water, business waste constituents			b.		
c.					
d.					
15. Special Handling Instructions and Additional Information PTN 015588-FD					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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 _____ Signature _____ Month Day Year 10/11/88					
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Kevin E. Dean Signature _____ Month Day Year 10/11/88					
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name _____ Signature _____ 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 _____ Month Day Year _____					

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125392

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No VT P0000019020000	Manifest No 0000	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
Generator's Name and Mailing Address Waste Chempain Transportation Co. King Street Burlington, VT 05401				A. State Manifest Document Number CT C 0167847		
4. Generator's Phone (802) 864-9884				B. State Gen. ID: 21		
5. Transporter 1 Company Name C.N. Laboratories, Inc.		6. US EPA ID Number NE D083179945		C. State Tran. ID: 01 P 0132		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Tran. Phone		
9. Designated Facility Name and Site Address Schwartz Recovery Service of New England, Inc. Lory Lane, Southington, CT 06489		10. US EPA ID Number CT D009717604		E. State Tran. ID		
				F. Tran. Phone		
				G. State Facility's ID		
				H. Facility's Phone 860-421-8983		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No.	13. Total Quantity	14. Unit Wt./Vol
a. Non Hazardous Solid Hazard Class: N/A UN/NA Number: Not Applicable				015P	07875	P NONE
b.						
c.						
d.						
Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. oil soaked steel				a.		
b.				d.		
15. Special Handling Instructions and Additional Information FIN # 016076-02						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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 that is determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Richard Duran		Signature <i>Richard Duran</i>			Month Day Year 07 14 88	
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Kevin E. Duran Sr.		Signature <i>Kevin E. Duran Sr.</i>			Month Day Year 07 14 88	
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature			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			Month Day Year	

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0167847



VERMONT AGENCY OF ENVIRONMENTAL CONSERVATION
HAZARDOUS WASTE MANAGEMENT PROGRAM

West Building, 103 South Main Street
Waterbury, Vermont 05676
(802)244-8702

Please print or type

(Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No 2050-0039 Expires 3-30-88

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No. **VT P 000000G 174000** Manifest Document No. **013**

2. Page 1 of 1 Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
The Waste Press, Inc.
P.O. Box 150
Dorset, VT 05402
4. Generator's Phone () **(802) 363-5555**

A. State Manifest Document Number
VT 0022354

B. State Generator's ID
1000 Hillsburg Road

5. Transporter 1 Company Name
Enviro-Laboratories

C. State Transporter's ID
ME F38171

6. US EPA ID Number
ME ID 023179945

D. Transporter's Phone () **(207) 775-3689**

7. Transporter 2 Company Name
8. US EPA ID Number
9. Designated Facility Name and Site Address
Solvent Recovery Service of New England, Inc.
100 Main St
Dorchester, CT 06489

E. State Facility's ID

F. Facility's Phone () **(203) 621-8363**

10. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol 15. Waste No.

a. **RQ Combustible Liquid**
WASTE LIQ (UN255) (EPA Ignitability)
b. **N.A.S. Flammable Liquid**
WASTE LIQ (UN1993) (EPA Ignitability)

9	DR	14	14	15	D001
14	DR	14	14	15	D001

16. Additional Descriptions for Materials Listed Above
PIN 15017-FD
aromatic, aliphatic
polyglycol ethers
15040-FD

K. Handling Codes for Wastes Listed Above
a. c. d.

17. Special Handling Instructions and Additional Information
The above wastes are labeled above in shaded area "X".
HAZARDOUS WASTE

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by their proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State law and regulations.
I, the undersigned generator, 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 feasible and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the risks 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 I have selected the best waste management method that is available to me and that I can afford.
Printed Typed Name: _____ Signature: _____ Month Day Year: _____

18. Transporter 1 Acknowledgement of Receipt of Materials
Printed Typed Name: **Kevin E. Duran Sr.** Signature: **Kevin E. Duran Sr.** Month Day Year: **03/10/88**

19. Transporter 2 Acknowledgement of Receipt of Materials
Printed Typed Name: _____ Signature: _____ Month Day Year: _____

20. Recipient, Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19
Printed Typed Name: _____ Signature: _____ Month Day Year: _____

In the event of a spill: emergency call Vermont State Police (802) 244-8702 and if within Vermont, The Vermont Department of Public Safety 1-800-641-5015

Copy 5: Transporter 1
VT 0022354

VERMONT AGENCY OF ENVIRONMENTAL CONSERVATION
HAZARDOUS MATERIALS MANAGEMENT PROGRAM

State Office Building
Montpelier, Vermont 05650

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2000-0404 Expires 12/31/96

In the event of a spill or emergency, contact the National Response Center (800) 424-8802 and if within Vermont, The Vermont Department of Public Safety (802) 828-3100

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Quantity	2. Page 1 of	Information in the shaded areas is not required by Federal law
3. Generator's Name and Mailing Address The Lane Press, Inc. P.O. Box 130 Burlington, VT 05402		VT P 0000001740	000029	A. State Manifest Document Number VT 0016802	
4. Generator's Phone ()	(802) 863-5555	6. US EPA ID Number	ME D 0 8 3 1 7 9 9 4 6	B. State Generator's ID 1000 Hinesburg Road	
5. Transporter 1 Company Name C. M. Laboratories		7. Transporter 2 Company Name		C. State Transporter's ID ME F 38171	
		8. US EPA ID Number		D. Transporter's Phone (207) 772-3689	
9. Designated Facility Name and Site Address Solvent Recovery Service of New England, Inc. Lary Lane Southington, CT 06489		10. US EPA ID Number CT D 0 0 9 7 1 7 6 0 4		E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility's ID	
				H. Facility's Phone (203) 621-8363	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	13. Total Quantity	14. Unit Wt./Vol	1. Waste No
a. HQ Waste Flammable Liquid HQ Waste Flammable Liquid UN1993 D001		002	DM	703 lbs.	D001
b.					
c.					
d.					
Additional Descriptions for Materials Listed Above A.) Contains aromatic, aliphatic solvents, polyglycol ethers. 15040-FD		Special Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information TSDY to designate handling HA code in shaded area 1.					
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 rail, road, according to applicable international and national government regulations, and all applicable State, law and regulations.					
Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste management plan under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated, that I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal that most effectively minimizes the present and future threat to human health and the environment.					
Printed/Typed Name Philip M. Drumbheller		Signature <i>Philip M. Drumbheller</i>		Month, Day, Year 030588	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Kevin E. Duhan Sr.		Signature <i>Kevin E. Duhan Sr.</i>		Month, Day, Year 030588	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		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 3					
Printed/Typed Name William B. Peterson		Signature <i>William B. Peterson</i>		Month, Day, Year 030588	

Copy 5: Transporter 1

U10062

**Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106**

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No ME D 0 7 1 7 4 9 3 2 9 0 9 9 0 1		Manifest Document No 0 9 9 0 1		2 Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State law.					
		3 Generator's Name and Mailing Address Maine Yankee Atomic Power Co. Box 408 Bailey Point Wiscasset, ME 04578						A. State Manifest Document Number CT C 0208620					
4 Generator's Phone (207) 382-6321						B. State Gen ID (See Appendix)							
5 Transporter 1 Company Name C.M. Laboratories, Inc.				6 US EPA ID Number ME D 0 3 3 1 7 9 9 4 5		C. State Tran ID ME F 3 8 1 7 1							
7 Transporter 2 Company Name						D. Tran. Phone 207 372-3489							
8 US EPA ID Number						E. State Tran ID							
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489						F. Tran. Phone							
10 US EPA ID Number CT D 0 0 9 7 1 7 6 0 4						G. State Facility's ID							
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						H. Facility's Phone 860-371-8481							
a. Hazardous Waste Liquid, n.o.s. ORM-E NA 9189						12. Containers No		13 Total Quantity		14 Unit Wt/Vol		15 Waste No.	
						022		DMO 1100G		CR02			
b. Non Hazardous Non Regulated Solid, n.o.s.						003		DMO 1500P		NONR			
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a. water 90-95%, petroleum oil 0-5%, dirt 0-5%						a.							
b. ferrous sulphate 90% clay 10%						b.							
15 Special Handling Instructions and Additional Information													
11a) PIN 017526-AD													
b) PIN 017526-AD													
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, packaged, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and all applicable State laws and regulations.													
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, and disposal that is available to me which minimizes the present and future threat to human health and the environment. OR, I am a small quantity generator. I have made a good faith effort to minimize my waste generation and selected the best waste management method that is available to me and that is appropriate.													
Printed/Typed Name John E. Deane						Signature <i>John E. Deane</i>						Month Day Year 11/02/88	
17 Transporter 1 Acknowledgement (Receipt of Materials)													
Printed/Typed Name John E. Deane						Signature <i>John E. Deane</i>						Month Day Year 11/02/88	
18 Transporter 2 Acknowledgement (Receipt of Materials)													
Printed/Typed Name						Signature						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						Month Day Year	

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP., OIL AND CHEMICAL SPILLS AT (203) 566-3338

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER U.S. COAST GUARD, 1 800 424 8802

COPY 5

CT C 0208620



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print; or type. (Form designed for use on elite (12-pitch)-typewriter) Form Approved, OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MEP000002100		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.	
3. Generator's Name and Mailing Address Nasco Automotive Machine 28 Ross St. Saco, ME 04072				A. State Manifest Document Number ME A 013303			
4. Generator's Phone (207) 284-5344		6. US EPA ID Number		C. State Transporter's ID		B. State Generator's ID	
5. Transporter 1 Company Name C.M. Laboratories, Inc.		8. US EPA ID Number ME D 0 8 1 1 7 9 9 4		D. Transporter's Phone 207-772-3689		E. State Transporter's ID	
7. Transporter 2 Company Name		8. US EPA ID Number		F. Transporter's Phone		G. State Facility's ID	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				10. US EPA ID Number CT D C 0 9 7 1 7 6 0 4		H. Facility's Phone 203-621-8383	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID-Number)				12. Containers		13. Total Quantity	14. Unit Wt/Vol
a. RQ Waste Corrosive Liquid, n.o.s. (EPA Corrosivity) Corrosive Liquid UN 1760				No. 004 Type D		00220	C
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above a. hot tank cleaner contains b. sodium hydroxide, grease, carbon, c. water d.				K. Handling Codes for Wastes Listed Above a. b. c. d.			
L. Special Handling instructions and Additional Information PIN 015062-AD							
M. 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 that is 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 Robert Hanson		Signature <i>Robert Hanson</i>		Month Day Year 10 09 88			
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>Kevin E. Deane Jr</i>		Date 10 09 88	
Printed/Typed Name Kevin E. Deane Jr		Signature <i>Kevin E. Deane Jr</i>		Month Day Year 10 09 88			
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature		Date	
Printed/Typed Name		Signature		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		Month Day Year			

TRANSPORTER COPY

ME A 013303

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill in Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-0777.



VERMONT AGENCY OF ENVIRONMENTAL CONSERVATION
 HAZARDOUS WASTE MANAGEMENT PROGRAM
 West Building, 103 South Main Street
 Waterbury, Vermont 05676
 (802)244-8702

See print or type (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-88

In the event of a spill or emergency, contact the National Response Center 1-800-424-8802 and if within Vermont, The Vermont Department of Public Safety 1-800-641-5005

Copy 5: Transporter 1
VT U024635

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. VT 004 02809300	Manifest Submittal No.	Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address Newport Plastics Corp. Derby Rd., Newport, VT 05855				A. State Manifest Document Number VT 0024635			
4. Generator's Phone: (802) 334-7941				B. State Generator's ID			
5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME D083179945		C. State Transporter's ID ME F3871		D. Transporter's Phone: 207-772-3689	
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 Solvent Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				10. US EPA ID Number CT D009717604		G. State Facility's ID	
				H. Facility's Phone: 203-421-8383			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No.	13. Total Quantity	14. Unit (Wt/Vol)	1. Waste No.	
a. HQ Waste Flammable Solid, n.o.s. (F003) Flammable Solid UN 1325			002	DM00800	P	F003	
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
a. acetone still bottoms		c.		d.		e.	
b.		d.		e.			
15. Special Handling Instructions and Additional Information 11a) PIN 015421-D							
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 transportation in accordance with applicable international and national government regulations, and all applicable State, local and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of wastes generated, to the extent feasible, 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 David J. Churchill Jr.		Signature <i>David J. Churchill Jr.</i>			Month Day Year 12/6/88		
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name KEVIN E. DURAN SR.		Signature <i>Kevin E. Duran Sr.</i>			Month Day Year 12/6/88		
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature			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 9							
Printed/Typed Name THOMAS PETERSON		Signature <i>Thomas Peterson</i>			Month Day Year		



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM. State Office Building
 Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No V.T.D.0.4.1.0.2.8.0.9.3.0.0.0.0.	Manifest Document No.	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.		
Generator's Name and Mailing Address Newport Plastics Corp. Derby Rd., Newport, VT 05855				A. State Manifest Document Number CT C 0208647			
4 Generator's Phone (802) 334-7941	5 Transporter 1 Company Name C.M. Laboratories, Inc.			6 US EPA ID Number M.E.D.0.9.7.1.7.9.0.4.5	B. State Facility ID ME 138171		C. State Title ME 138171
7 Transporter 2 Company Name				8 US EPA ID Number	D. Tran. Phone 703 772-3683		
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				10 US EPA ID Number C.T.D.0.0.9.7.1.7.6.0.4	E. State Title ID		
				F. Tran. Phone			
				G. State Facility's ID			
				H. Facility's Phone			
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12 Containers No	13 Total Quantity	14 Unit Wt/Vol	15 Waste No.		
a RQ Waste Flammable Solid, n.o.s. (F003) Flammable Solid (N 1325)		002	D	0900	P	003	
Additional Descriptions for Materials Listed Above		K Handling Codes for Wastes Listed Above					
a acetone still bottoms		a					
b		b					
16 Special Handling Instructions and Additional Information PIS 015421-ID (11a)							
17 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classed, packaged, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international, national, and state government regulations, and all applicable State laws and regulations. I am a large quantity generator, certifying that the above program is 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 practical method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR I am a small quantity generator, I have made a good faith effort to minimize my waste generation and I am in the best waste management practice.							
Printed/Typed Name		Signature		Month Day Year 10/19/95			
18 Transporter 1 Acknowledgement: I received the materials		Signature		Month Day Year 10/19/95			
Printed/Typed Name		Signature		Month Day Year			
18 Transporter 2 Acknowledgement: I received the materials		Signature		Month Day Year			
Printed/Typed Name		Signature		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		Month Day Year			

COPY 5

CT C 0208647

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No VT D 0 4 1 0 2 8 0 9 3 0 0 0 0 1		2. Page 1 of 1		3. Information in the shaded areas is not required by Federal law but may be required by State law	
		5. Generator's Name and Mailing Address Newport Plastics Corp. Derby Rd., Newport, VT 05855		A. State Manifest Document Number CT C 0125395			
4. Generator's Phone (302) 334-7941		6. US EPA ID Number VT D 0 8 3 1 7 9 9 4 5		D. State Facility's ID CT D 0 0 9 7 1 7 6 0 4			
7. Transporter 1 Company Name C.M. Laboratories, Inc.		8. US EPA ID Number VT D 0 8 3 1 7 9 9 4 5		E. State Facility's ID CT D 0 0 9 7 1 7 6 0 4			
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10. US EPA ID Number CT D 0 0 9 7 1 7 6 0 4		F. State Facility's ID CT D 0 0 9 7 1 7 6 0 4			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit	15. Waste No.	
a. RC Waste Flammable Solid, n.o.s. (F003) Flammable Solid UN 1225			No. 0107 Type DM	02800	3	F003	
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above				
a. acetone still bottles			a. SC				
b. residue to other - 11a			b. SC				
15. Special Handling Instructions and Additional Information RTN 115421-ID 11a:							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations. I am a large quantity generator. I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name W. J. ...			Signature <i>W. J. ...</i>			Month Day Year 04/13/88	
17. Transporter 1 Acknowledgement of Receipt of Materials			Signature <i>Kevin E. ...</i>			Month Day Year 04/13/88	
Printed/Typed Name Kevin E. ...			Signature <i>Kevin E. ...</i>			Month Day Year 04/13/88	
18. Transporter 2 Acknowledgement of Receipt of Materials			Signature			Month Day Year	
Printed/Typed Name			Signature			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			Month Day Year	

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125395

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building
 Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No V.T.D.0.0.2.0.7.4.8.9.6.0.0.0.0.1	Manifest Document No 0.0.0.0.1	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.		
Generator's Name and Mailing Address Green City Printers Pine St. P.O. Box 756 Burlington, VT 05402				A. State Manifest Document Number CT C 0208632			
4 Generator's Phone (802) 864-4566				B. State Facility ID (Site Address) ME 038171			
5 Transporter 1 Company Name C.M. Laboratories, Inc.		6 US EPA ID Number M.E.D.0.8.3.1.7.9.9.4.5		D. Tran. Phone 207-772-3689			
7 Transporter 2 Company Name		8 US EPA ID Number		E. State Facility ID			
9 Designated Facility Name and Site Address Solvents Recovery Services of New England, Inc. Lazy Lane, Southington, CT 06489				10 US EPA ID Number C.T.D.0.0.9.7.1.7.6.0.4		G. State Facility's ID 003-621-8383	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No.	13 Total Quantity	14 Unit Wt. Vol	15 Waste No	
a PC Waste Ink (EPA Ignitability) Combustible Liquid UN 1210			002	DM 01000	P	D001	
Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above				
a.			a.				
b.			b.				
c.			c.				
d.			d.				
L. Handling Instructions and Additional Information 1a) PIN 014505-ID							
<p>GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.</p> <p>I, the undersigned, generator, certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree that is determined to be technically, practically and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the greatest 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 by using the best waste management method that is available to me and that I can afford.</p>							
M. Transporter Acknowledgement of Receipt of Materials			Signature		Month Day Year		
Printed Typed Name			Signature		Month Day Year		
N. Transporter 2 Acknowledgement of Receipt of Materials			Signature		Month Day Year		
Printed Typed Name			Signature		Month Day Year		
O. Discrepancy Indication Space							
<p>P. Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 9</p>							
Printed Typed Name			Signature		Month Day Year		

COPY 5

CT C 0208632

STATE OF CONNECTICUT DEPARTMENT OF ENVIRONMENTAL PROTECTION Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST. 1. Generator's US EPA ID No. VT0D02074896. 2. Page 1 of 1. 3. Generator's Name and Mailing Address: Ocean City Printers, Inc., 756 Pine Street, P.O. Box 756, Burlington, Vermont 05402. 4. Generator's Phone: (802) 864-4566. 5. Transporter 1 Company Name: C.M. Laboratories, Inc. 6. US EPA ID Number: MED083179945. 7. Transporter 2 Company Name: [Blank]. 8. US EPA ID Number: [Blank]. 9. Designated Facility Name and Site Address: Solvents Recovers Services of New England, Inc., Lasy Lane, Southington, Ct. 06489. 10. US EPA ID Number: CTD09717604. 11. US DOT Description: RC Waste Ink, Flammable Liquid (EPA Ignitability) UN 120. 12. Containers: 0102, 2400, 110, 5. 13. Total Quantity: 110. 14. Unit: L. 15. Special Handling Instructions and Additional Information: [Blank]. 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations. 17. Transporter 1 Acknowledgement of Receipt of Materials: Kevin E. Dean Sr. 18. Transporter 2 Acknowledgement of Receipt of Materials: [Blank]. 19. Discrepancy Indication Space: [Blank]. 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19: [Blank].

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3338. IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1 800 424 8802.

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125378

GENERATOR TRANSPORTER

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**

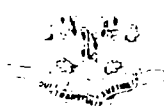


Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME0067045898000000	Manifest of 04106	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
3. Generator's Name and Mailing Address Rockwood Systems Corp. 80 Second St. South Portland, ME 04106			A. State Manifest Document Number CT C 0125398		
4. Generator's Phone 307 799-3341		6. US EPA ID Number ME0083179945		C. State License No. ME F 35111	
5. Transporter 1 Company Name C.M. Laboratories, Inc.		8. US EPA ID Number		D. Trans. Phone No. ME 771-3000	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State License No.	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10. US EPA ID Number CTD009717604		G. State Facility's ID CT 021-0001	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol
a. Hazardous Waste Liquid, n.o.s. ORM-E NA9189			002 DM	00170	G
b. RC Waste Dichloroethylene ORM-A (F002) UN1907			001 DM	00050	G
c. RC Waste Hexamethyl EPA Compatibility: Plastic Liquid UN1219			001 DM	00050	G
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a. waste hexylene glycol			TOY Cladding 301		
15. Special Handling Instructions and Additional Information 1111 PIN 015439-AD 1111 PIN 015435-AD 1111 PIN 015438-AD					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations. I am a large quantity generator. I identify 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, I am a small quantity generator. I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name		Signature		Month Day Year	
17. Transporter 1 Acknowledgment of Receipt of Materials		Signature		Month Day Year	
Printed/Typed Name		Signature		Month Day Year	
18. Transporter 2 Acknowledgment of Receipt of Materials		Signature		Month Day Year	
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy indicating, if any					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19					
Printed/Typed Name		Signature		Month Day Year	

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125398

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106



Please print or type (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MD10817812000000		Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
		Generator's Name and Mailing Address SAS Pittsfield P.O. Box 250 Pittsfield, ME 04967		A. State Manifest Document Number CT C 0125382		B. State Government Use Only	
4. Generator's Phone (207) 487-3252		6. US EPA ID Number MD033173945		C. State Transporter ID No. MEP30171		D. Tran. Phone ()	
5. Transporter 1 Company Name C.N. Laboratories, Inc.		8. US EPA ID Number		E. State Facility ID		F. Tran. Phone ()	
7. Transporter 2 Company Name		10. US EPA ID Number		G. State Facility's ID		H. Facility's Name	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10. US EPA ID Number CTD009717634		I. Facility's Name		J. Facility's Address	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol	
a. Hazardous Waste Liquid, n.o.s. OR1-E MS169		No. Type		Quantity		Waste No.	
b.							
c.							
d.							
Additional Descriptions for Materials Listed Above water 30% propylene glycol 20% dye pigments 50%		K. Handling Codes for Wastes Listed Above					
a.		b.					
b.		c.					
c.		d.					
15. Special Handling Instructions and Additional Information PIN 015300-AD							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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		Signature		Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name Kevin E. Ducey Sr		Signature <i>Kevin E. Ducey Sr</i>		Month Day Year 3/27/88	
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		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		Month Day Year	

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3338

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1-800-424-8802

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125382

STATE OF CONNECTICUT DEPARTMENT OF ENVIRONMENTAL PROTECTION Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST. 1 Generator's US EPA ID No. HED05460317900000. 2 Page 1 of 1. 3 Generator's Name and Mailing Address: SPENCER PRESS INC., SPENCER DRIVE, WELLS, ME 04090. 4 Generator's Phone: 207 546-3926. 5 Transporter 1 Company Name: C.M. LABORATORIES, INC. 6 US EPA ID Number: HED0803179945. 7 Transporter 2 Company Name: [blank]. 8 US EPA ID Number: [blank]. 9 Designated Facility Name and Site Address: SOLVENTS RECOVERY SERVICE OF NEW ENGLAND, INC. LAZY LANE, SOUTHINGTON, CT 06489. 10 US EPA ID Number: CT0800717604. 11 US DOT Description: HQ WASTE FLAMMABLE LIQUID, N.L.S. OSHA IGNITABILITY FLAMMABLE LIQUID UN 1993. 12 Containers: 15 DM. 13 Total Quantity: 25 G. 14 Unit Wt/Vol: G. 15 Waste No.: D001. 16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations. 17 Transporter 1 Acknowledgement of Receipt of Materials: Printed Typed Name: Larry Tracey, Signature: [Signature], Month Day Year: 12-24-89. 18 Transporter 2 Acknowledgement of Receipt of Materials: Printed Typed Name: [Signature], Signature: [Signature], Month Day Year: 12-26-89. 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], Signature: [Signature], Month Day Year: 12-26-89.

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0138165

IF THE RECEIPTOR OF THIS MANIFEST RECEIVES IT FROM THE GENERATOR OR TRANSPORTER, CONTACT THE DEPARTMENT OF ENVIRONMENTAL PROTECTION, OIL AND CHEMICAL SPILLS AT (203) 260-3131.

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**

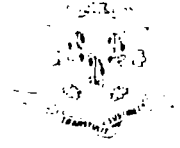
Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No HE D 0 5 4 6 0 8 1 7 9 0 0 0 0 1	Manifest Document No	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
3. Generator's Name and Mailing Address Spencer Press Inc. Spencer Drive, Wallis, ME 04090			A. State Manifest Document Number CT C 0167843		
4. Generator's Phone (207) 646-9926			B. State Form ID (DOT or DOT with part 102 with part 102 with part 102 with part 102)		
5. Transporter 1 Company Name C.N. Laboratories, Inc.		6. US EPA ID Number HE D 0 8 3 1 7 9 9 4 5		C. State Form ID 13871	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Tran Phone 207 212-3889	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Ledy Lane, Southington, CT 06489			10. US EPA ID Number CT D 0 8 9 7 1 7 6 0 4		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt. Vol
a. NO Waste Flammable Liquid, n.o.s. (NPA Ignitability) Flammable Liquid UN 1993			No. Type		
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a. stocked solvent 40-500			a.		
b. aromatic hydrocarbon distillate 40-500			b.		
c. aromatic hydrocarbon distillate 40-500			c.		
d. aromatic hydrocarbon distillate 40-500			d.		
15. Special Handling Instructions and Additional Information					
IIa) PCB 014568-FD					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.					
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 LARRY TRACEY		Signature <i>Larry Tracey</i>		Month Day Year 06 29 88	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name Kevin E. Quinn SR.		Signature <i>Kevin E. Quinn SR.</i>	
		Month Day Year 06 29 88			
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature	
		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 Allen B. Peterson		Signature <i>Allen B. Peterson</i>		Month Day Year 06 29 88	

FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3338
FOR SPILLS OUTSIDE OF CONNECTICUT CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1 800 421 8802
IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1 800 421 8802

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0167843

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. MEP03460817900001	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
3 Generator's Name and Mailing Address Spencer Press of Maine Inc. 98 Spencer Drive Wells, ME 04090			A. State Manifest Document Number CT C 0125388		
4 Generator's Phone (207) 646-9926			B. State Gen. ID		
5. Transporter 1 Company Name C.N. Laboratories, Inc.		6. US EPA ID Number MEP083179945		C. State Trans. ID ME F3971	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Tran. Phone 772-3485	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10 US EPA ID Number CTD009717604		E. State Trans. ID	
				F. Tran. Phone	
				G. State Facility's ID	
				H. Facility's Phone 860-421-8083	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt./Vol
			No	Type	Waste No.
a RQ Waste Combustible Liquid, n.o.s. (EPA Ignitability) Combustible Liquid RA1993			014	2000	770
b					
c					
d					
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a. flammable solvent 40-50%			a. TU		
b. aromatic hydrocarbon distillates			b. FL-D		
c.			c.		
d.			d.		
15 Special Handling Instructions and Additional Information PIB 014568-PD Item 11a					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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 John A. McCurry Jr		Signature <i>[Signature]</i>		Month Day Year 05 19 88	
17 Transporter 1 Acknowledgement of Receipt of Materials					
Printed/Typed Name Kevin E. Dean Jr		Signature <i>[Signature]</i>		Month Day Year 05 20 88	
18 Transporter 2 Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
19 Discrepancy Indication Space 014568-PD Item 11a					
20 Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19					
Printed/Typed Name Dave Bliss		Signature <i>[Signature]</i>		Month Day Year	

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125388

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST
1 Generator's US EPA ID No: VT P 0 0 0 0 0 2 0 0 8 0 0 0 1
2. Page 1 of 1
Generator's Name and Mailing Address: State of Vermont Agency of Transportation, 133 State St., Montpelier, VT 05602
A. State Manifest Document Number: CT C 0208642
4 Generator's Phone: 802 828-2078
5 Transporter 1 Company Name: C.M. Laboratories, Inc.
6. US EPA ID Number: M R T 0 9 7 1 7 9 9 4 5
7 Transporter 2 Company Name:
8. US EPA ID Number:
9 Designated Facility Name and Site Address: Solvents Recovery Service of New England, Inc., Lazy Lane, Southington, CT 06489
10 US EPA ID Number: C.T.D. 0. 0. 9. 7. 1. 7. 6. 0. 4
11 US DOT Description: a. RO Waste Petroleum Distillate (EPA Ignitability) Combustible Liquid UN 1268; b. RO Waste Combustible Liquid, n.o.s. (EPA Ignitability) Combustible Liquid NA 1993
12 Containers: a. 00/PM 00015G; b. 001PM 00015C
13 Total Quantity:
14 Unit:
15 Special Handling Instructions: 11a) BIN 017538-PD; 8) PIN 017540-PD
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and all applicable State laws and regulations.
17 Transporter 1 Acknowledgement: Received Materials; Signature: Kevin E. Duran Sr.; Date: 11-20-89
18 Transporter 2 Acknowledgement: Received Materials; Signature:
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.

COPY 5

CT C 0208642



VERMONT AGENCY OF ENVIRONMENTAL CONSERVATION
HAZARDOUS WASTE MANAGEMENT PROGRAM
West Building, 103 South Main Street
Waterbury, Vermont 05676
(802)244-8702

Please print or type (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-88

In the event of a spill or emergency, contact the National Response Center 1-800-424-8802 and if within Vermont, The Vermont Department of Public Safety 1-800-641-5005

Copy 5: Transporter 1

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. VT P 0 0 0 0 0 1 7 2 4 0 0 0 0 1	Manifest Document No.	2 Page 1 of 1	Information in the shaded areas is not required by Federal law.
3 Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602 802-828-2078		6 US EPA ID Number M E P 0 8 3 1 7 9 9 4 5		A State Manifest Document Number VT 1-0024637	
4 Generator's Phone (802) 828-2078		7 Transporter 1 Company Name C.M. Laboratories, Inc.		B State Manifest Agency VT 05602	
5 Transporter 1 Company Name C.M. Laboratories, Inc.		8 US EPA ID Number M E P 0 8 3 1 7 9 9 4 5		C State Transporter's ID M E P 3 8 1 7 1	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10 US EPA ID Number F T P 0 9 9 7 1 7 6 0 4		D Transporter's Phone 802-772-3689	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12 Containers	13 Total Quantity	14 Unit	15 Waste No.
a. RC Waste Paint (F003, F005) Flammable Liquid UN 1263		No	Type	WT/Vol	
J Additional Descriptions for Materials Listed Above		K Handling Codes for Wastes Listed Above			
a.		b.			
b.		c.			
c.		d.			
d.					
15 Special Handling Instructions and Additional Information					
!1a) PIN 020030-FD					
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State law and 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 SIDNEY ACVILLE		Signature <i>Sidney Acville</i>		Month Day Year 12/1/88	
17 Transporter 1 Acknowledgement or Receipt of Materials					
Printed/Typed Name Kevin E. Dureau Sr		Signature <i>Kevin E. Dureau Sr</i>		Month Day Year 12/1/88	
18 Transporter 2 Acknowledgement or Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
19 Discrepancy Indication Space					
20 Facility Owner or Operator Certification or receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name A...		Signature <i>A...</i>		Month Day Year 12/1/88	

VT 0024637

DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

FOR STATE USE ONLY

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. V.T.P.0.0.0.0.0.1.9.6.3.0.0.0.0.1		Manifest Document No. 0.0.0.0.1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law, but may be required by State law.					
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602						A. State Manifest Document Number CT C 0208621							
4. Generator's Phone (802) 328-2087						C. State Facility's ID 017194							
5. Transporter 1 Company Name C.M. Laboratories, Inc.				6. US EPA ID Number M.E.D.0.8.3.1.7.9.9.4.5		D. Tran. Phone 328-2087							
7. Transporter 2 Company Name				8. US EPA ID Number		E. State Tran. ID							
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489						10. US EPA ID Number C.T.D.0.0.9.7.1.7.6.0.4							
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt./Vol.		15. Waste No.	
a. RC Waste Combustible Liquid, n.c.s. (EPA Ignitability) Combustible Liquid NA 1993						004 D.M.		00220 G		0001			
b. RC Waste Paint (P003, P005) Flammable Liquid UN 1263						001 D.M.		00055 G		0003		0005	
Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a. petroleum oil, asphalt cutback, diesel fuel, dirt, carbon						a.							
b. paint oils, fillers, pigments, MK, toluene, xylene						b.							
15. Special Handling Instructions and Additional Information 11a) PIN 017194-PD b) PIN 017195-PD													
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 properly classified, packaged, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable Federal, State and local government regulations, and all applicable State laws and regulations. I am a large quantity generator and 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 and 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 selected the best waste management practice that is available to me and that I can afford. Printed Name: Manana W Taylor Signature: <i>Manana W Taylor</i> Month Day Year: 9/10/88													
17. Transporter 1 Acknowledgment of Receipt of Materials Printed Name: Ken E. [unclear] Signature: <i>Ken E. [unclear]</i> Month Day Year: 9/10/88													
18. Transporter 2 Acknowledgment of Receipt of Materials Printed Name: Signature: Month Day Year:													
19. Discrepancy Indication Space													
20. Facility Owner's Certification of receipt of hazardous materials covered by this manifest except as noted in item 19 Printed Name: Signature: Month Day Year:													

COPY 5

CT C 0208621

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM. State Office Building
Hartford, CT 06106**

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No V.T.D. 980730808100001	Manifest Document No 00001	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602			A. State Manifest Document Number CT C 0208627		
4. Generator's Phone 1 802 328-2087	6. US EPA ID Number ME D 0 8 3 1 7 9 0 4 8		C. State Transfer ID ME 0317		
5. Transporter 1 Company Name C.M. Laboratories, Inc.	8. US EPA ID Number CT D 0 0 9 7 1 7 6 0 4		D. Tran. Phone 87 772-300		
7. Transporter 2 Company Name	10. US EPA ID Number		E. State Tran. ID		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489			F. Tran. Phone		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No	13. Total Quantity	14. Unit Wt/Vol
a. NO Waste Flammable Liquid, n.o.s. (F003) Flammable Liquid UN 1993			001	DM 0.055	G F003
b. NO Waste Combustible Solid, n.o.s. (EPA Ignitability) Combustible Solid NA 1993			001	DM 0.055	G F003
c. NO Hazardous Waste Solid, n.o.s. (F003, F005) ORM-E NA 9189			001	DM 0.055	G F003
d. Hazardous Waste Solid, n.o.s. ORM-E NA 9189			001	DM 0.055	G C R 0 2
Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a. xylene 75%, asphalt 25%			c. contains toluene, xylene, pigments, fillers, dirt, vegetation, water		
b. asphalt emulsion 80%, clay 20%			d. sand 90-95%, hydraulic oil		
15. Special Handling Instructions and Additional Information 5-102			115		
11a) PIN 015625-FD			c) PIN 017532-ID		
b) PIN 015625-FD			d) PIN 017531-ID		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and all applicable State laws and regulations.					
I am a large quantity generator (part 1) that I have a program in place that, in 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, I am a small quantity generator. I have made a good faith effort to minimize my waste generation and select the best waste management practice that is available and that I am using.					
Printed/Typed Name George S. Combes			Signature <i>George S. Combes</i>		Month Day Year 11/10/88
17. Transporter 1 Acknowledgment Receipt of Materials			Signature <i>Kevin E. Duran</i>		Month Day Year 11/11/88
Printed/Typed Name Kevin E. Duran			Signature		Month Day Year
18. Transporter 2 Acknowledgment Receipt of Materials			Signature		Month Day Year
Printed/Typed Name			Signature		Month Day Year
19. Discrepancy Indication (Date)					
20. Facility Owner/Operator Certification: I receive hazardous materials covered by this manifest except as noted in item 19.					
Printed/Typed Name			Signature		Month Day Year

FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3338

CONTACT THE NATIONAL RESPONSE CENTER (NRC) U.S. COAST GUARD (800) 471-8802

COPY 5

CT C 0208627



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM. State Office Building
Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No. V T P 0 0 0 0 0 1 7 2 6 0 0 0 0 0 1
Manifest Document No. 1

2 Page 1 of 1
Information in the shaded areas is not required by Federal law but may be required by State law

3 Generator's Name and Mailing Address
State of Vermont- Agency of Transportation
133 State St., Montpelier, VT 05602

A. State Manifest Document Number
CT C 0208631

4 Generator's Phone (802) 878-2087

B. State Gov. ID: (none)
C. State Tran. ID: (none)
D. Tran. Phone: (none)

5 Transporter 1 Company Name
C.M. Laboratories, Inc.
6. US EPA ID Number
M E D 0 8 7 7 7 9 9 4 5

E. State Tran. ID: (none)
F. Tran. Phone: (none)

7 Transporter 2 Company Name
8. US EPA ID Number

9 Designated Facility Name and Site Address
Solvents Recovery Service of New England, Inc.
Lezy Lane, Southington, CT 06489
10 US EPA ID Number
C.T.D.0.0.9.7.1.7.6.0.4

G. State Facility's ID: (none)
H. Facility's Phone: (none)

11 US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)
12. Containers No. Type
13 Total Quantity
14 Unit Wt/Vol
15 Waste No.

Table with 5 columns: Description, Containers, Total Quantity, Unit, Waste No.
Row a: Waste Combustible Liquid, n.o.s. Combustible Liquid NA 1993, 0.45 D.M., 0.0225 G, C 001
Row b: RC Waste Combustible Liquid, n.o.s. (HFA Ignitability) Combustible Liquid NA 1993, 0.45 D.M., 0.0225 G, D 001

J. Additional Descriptions for Materials Listed Above
resins, aromatic hydrocarbons, fillers, asphalt roof coating

K. Handling Codes for Wastes Listed Above

15 Special Handling Instructions and Additional Information
11a) PIN 017020-ID (Resin)
b) PIN 017019-ID (Tar)
these 2 products are packaged in 5 gallon pails

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

Printed/Typed Name: Ronald H Martin
Signature: Ronald H Martin
Month Day Year: 11-11-1988

17 Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Kevin E DeRau Sr
Signature: Kevin E DeRau Sr
Month Day Year: 11-11-1989

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

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338
FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338
IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1-800-424-8802

COPY 5
CT C 0208631



STATE OF CONNECTICUT DEPARTMENT OF ENVIRONMENTAL PROTECTION Hazardous Waste MANIFEST PROGRAM, State Office Building Hartford, CT 06106

Use type (or print) (Form designed for use on elite (12-pitch) typewriter.) FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST. Includes fields for Generator's Name (State of Vermont Agency of Transportation), Transporter 1 (C.M. Laboratories, Inc.), Designated Facility (Solvents Recovery Service of New England, Inc.), and waste descriptions (Hazardous Waste Solid, Waste Asphalt). Includes sections for Generator's Certification and Transporter Acknowledgements.

GENERATOR

COPY 5

CT C 0208629



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.) FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. V.T.P.O.O.O.O.O.1.8.0.3	Manifest Document No. 0.0.0.0.1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602			A. State Manifest Document Number CT C 0208626		
4. Generator's Phone (802) 9828-2087	5. Transporter 1 Company Name C.M. Laboratories, Inc.	6. US EPA ID Number M.E.D.O.8.3.1.7.9.9.4.5	B. State Office (Optional) Montpelier, VT 05705		
7. Transporter 2 Company Name	8. US EPA ID Number	C. State Office (Optional) Montpelier, VT 05705			
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lark Lane, Southington, CT 06489		10. US EPA ID Number C.T.D.O.9.9.7.1.7.5.0.4		G. State Facility's ID 02-521-8383	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No.	13. Total Quantity	14. Unit Wt./Vol. Waste No.
a. RQ Waste Asphalt, Cot Back (EPA Ignitability) Combustible Liquid NR 1999			001	DM 000.40	G D001
Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information 11a) PIN 016840-ID					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.					
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name: R. P. Ryan Signature: <i>[Signature]</i> Month Day Year: 11/10/88					
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name: Kevin E. Dean Sr. Signature: <i>[Signature]</i> Month Day Year: 11/10/88					
19. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19 Printed/Typed Name: _____ Signature: _____ Month Day Year: _____					

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No V.T.P.0.0.0.0.0.1.7.2.2.0.0.0.1	Manifest Document No 00001	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
3. Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602			A. State Manifest Document Number CT C 0208625		
4. Generator's Phone 802 828-2087	5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number M.E.D.0.8.3.1.7.9.9.4.5	B. State Facility ID 0208625	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Tran. Phone 802 828-2087	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489			10. US EPA ID Number C.T.D.0.0.9.7.1.7.6.0.4	E. State Tran. ID	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt/Vol
			No	Type	Waste No.
a. HQ Waste Combustible Liquid, n.o.s. (EPA Ignitability) Combustible Liquid NA 1993			001	M	0.0055 G
b. HQ Waste Asphalt, Cut Back (EPA Ignitability) Combustible Liquid NA 1993			001	D.M	0.0055 G
c. Hazardous Waste Solid, n.o.s. ORM-B NA 3189			001	D.M	0.0055 G
15. Additional Descriptions for Materials Listed Above:			K. Handling Codes for Wastes Listed Above		
a. fillers and resins 50-75% asphalt, cutback 25-50%			b.		
c. dirt, sand 50% asphalt, cutback 50%			d.		
d. asphalt, cut back					
16. Special Handling Instructions and Additional Information					
11a) PIN 016839-ID b) PIN 016838-ID c) PIN 016841-ID					
17. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.					
I am a generator of hazardous waste and I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be appropriate. I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future adverse effects on 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 practicable method of treatment, storage, or disposal that is available to me and that I can afford.					
Printed Typed Name			Signature		Month Day Year
Transporter 1			<i>[Signature]</i>		11/10/88
Printed Typed Name			Signature		Month Day Year
Transporter 2			<i>[Signature]</i>		11/10/88
18. Discrepancy and Correction Codes					
19. Receiver's Certification of receipt of hazardous materials covered by this manifest except as noted in item 19					
Printed Typed Name			Signature		Month Day Year

COPY 5
CT C 0208625

DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM. State Office Building
Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No VT P 0 0 0 0 0 1 8 1 0 0 5 0 0 1		Manifest Document No 0 5 0 0 1	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law	
3 Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602					A. State Manifest Document Number CT C 0208623		
4 Generator's Phone (802) 828-2087		5 Transporter 1 Company Name C.M. Laboratories, Inc.		6 US EPA ID Number M E D 0 8 3 1 7 9 9 4 5		D. Trans. Phone 802 828-2087	
7 Transporter 2 Company Name		8 US EPA ID Number		E. State Trans. ID		F. Trans. Phone	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				10 US EPA ID Number C T D 0 0 9 7 1 7 5 0 4		G. State Facility's ID 0 2 0 8 6 2 3	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)					12. Containers	13 Total Quantity	14. Unit
					No.	Type	Wt/Vol
a RC Hazardous Waste Solid, n.o.s. (EPA Ignitability) ORM-E RA 9189					0 0 1	PM	0 0 0 5 0 G
b							
c							
d							
Additional Descriptions for Materials Listed Above asphalt cutback, soil, vegetation, moisture					K. Handling Codes for Wastes Listed Above a. b. c. d.		
15 Special Handling Instructions (See Additional Information) 11a) PIN 017177-ID							
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, packaged, marked, and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations. I am a large quantity generator. I certify 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, 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 RAYMOND G GILL				Signature <i>Raymond G Gill</i>		Month Day Year 11 10 1988	
17 Transporter 1 Acknowledgment - Receipt of Materials				Signature <i>Ken F. ...</i>		Month Day Year 11 10 1988	
Printed/Typed Name				Signature		Month Day Year	
18 Transporter 2 Acknowledgment - Receipt of Materials				Signature		Month Day Year	
Printed/Typed Name				Signature		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		Month Day Year	

FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER U.S. COAST GUARD, 1 800 424 8902

FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338

COPY 5

CT C 0208623

COPY 5: Transporter 1 retains

DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

Use type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No V.T.D.9.8.0.6.5.7.6.3.1.0.0.0.0.1	Manifest Document No. 0.0.0.0.1	2. Page 1 of 1	Information in the shaded area is not required by Federal law but may be required by State law.
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602		A. State Manifest Document Number CT C 0208624		B. State Govt ID No. (State Department) [REDACTED]	
4 Generator's Phone 502 928-2087		5 Transporter 1 Company Name C.M. Laboratories, Inc.		6 US EPA ID Number M.T.D.9.8.0.1.7.9.9.5.5	
7 Transporter 2 Company Name		8 US EPA ID Number		C. State ID No. (Transporter) [REDACTED]	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lark Lane, Southington, CT 06489		10 US EPA ID Number C.M.D.9.7.1.7.6.0.4		D. Tran. Phone [REDACTED]	
				E. State ID No. (Facility) [REDACTED]	
				F. Tran. Phone [REDACTED]	
				G. State Facility's ID [REDACTED]	
				H. Facility's Phone 203-671-8383	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No.	13. Total Quantity	14. Unit Wt./Vol.
a. Hazardous Waste Liquid, n.o.s. (CM-E NA 9189)			00.2PM	00.1.1.0 G	00.1.1.0 G
b. RC Hazardous waste Solid, n.o.s. (EPA Ignitability) CM-E NA 9189			00.2PM	00.1.1.0 G	00.1.1.0 G
c. RC Waste Flammable Solid, n.o.s. (F003, F005) Flammable Solid UN 1325			00.2PM	00.1.1.0 G	F003 F005
d. RC Waste Flammable Solid, n.o.s. (F003, F005) Flammable Solid UN 1325			00.1PM	00.055 G	F003 F005
Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a. water and tar cutback			a. traffic paint, clay, dirt, soil		
b. rubberized sealcoat			b. Pigments + fillers 50-80% MEK 10% to base 5-10%		
15. Special Handling Instructions and Additional Information Acetone < 5%					
11a) PIN 016236-ID			c) PIN 016175-ID		
b) PIN 016196-ID			d) PIN 016212-ID		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this shipment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and to applicable State laws and regulations.					
I, as a large quantity generator, 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 proper type, method of treatment, storage, or disposal method available to me which minimizes the present and future threat to human health and the environment. OR, I, as a small quantity generator, have made a good faith effort to minimize my waste generation and have the best waste management method available to me for my waste.					
Printed Name VT-ACF-DIST 3 BY W. J. Davis			Month Day Year 10/31/88		
17. Transporter 1 Acknowledgment of Receipt of Materials			Signature [Signature]		
Printed Name RESERVE			Month Day Year 10/31/88		
18. Transporter 2 Acknowledgment of Receipt of Materials			Signature		
Printed Name			Month Day Year		
19. Discrepancy and Other Space					
20. Facility Owner/Operator Certification of Receipt of Hazardous Materials Covered by this Manifest (except as noted in item 19)					
Printed Name			Signature		
Month Day Year			Month Day Year		

COPY 5

CT C 0208624



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building
 Hartford, CT 06106

FOR STATE USE ONLY

Please type (or print) (Form designed for use on elite (12-pitch, typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. V.T.P.O.O.O.O.O.1.9.6.2	Manifest Document No. 0.0.0.0.1	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law	
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602				A. State Manifest Document Number CT C 0208622		
4 Generator's Phone (802) 828-2087		6. US EPA ID Number M.E.D.O.8.3.1.7.9.9.4.5		D. State Facility ID 01E F38171		
5 Transporter 1 Company Name C.M. Laboratories, Inc.		8 US EPA ID Number		D. Tran Phone 807 712-3683		
7 Transporter 2 Company Name		10 US EPA ID Number		E. State Facility ID		
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lory Lane, Southington, CT 06489		10 US EPA ID Number C.T.D.O.8.9.7.1.7.6.0.4		G. State Facility's ID 302-621-8383		
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12 Containers No	13 Total Quantity	14 Unit Wt./Vol	1. Waste No.	
a. RC Waste Combustible Liquid, n.o.s. (EPA Ignitability) Combustible Liquid NA 1993		002	D.M	0040.0	G	B001
Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
a. asphalt cutback 50A		a.				
b. tar 50B		b.				
15 Special Handling Instructions and Additional Information 11a) PIN 017191-ID		16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and all applicable State laws and 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 that a program had 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: Stanley E. Robinson Signature: <i>Stanley E. Robinson</i> Month: 11 Day: 15 Year: 1988				
17 Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name: Kevin E. Dezan Sr. Signature: <i>Kevin E. Dezan Sr.</i> Month: 10 Day: 31 Year: 1988		18 Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name: Signature: 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 9 Printed/Typed Name: Signature: Month: Day: Year:				

COPY 5: Transporter 1 retains

COPY 5
CT C 0208622



VERMONT AGENCY OF ENVIRONMENTAL CONSERVATION
HAZARDOUS WASTE MANAGEMENT PROGRAM
West Building, 103 South Main Street
Waterbury, Vermont 05676

(802)244-8702

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-88

if within Vermont, The Vermont Department of Public Safety 1-800-641-5002
 if within Vermont, contact the National Response Center 1-800-424-8802
 In the event of an emergency, contact the National Response Center 1-800-424-8802

Copy 5: Transporter 1
 VTC064000

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. VT P 000000199100001		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law									
3. Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602						A. State Manifest Document Number VT 0024636											
4. Generator's Phone (802) 828-2078						B. State Generator's ID Montpelier, VT 05602											
5. Transporter 1 Company Name C.M. Laboratories, Inc.			6. US EPA ID Number ME P 083179945			C. State Transporter's ID ME F 38171											
7. Transporter 2 Company Name						D. Transporter's Phone 207-772-3689											
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489						E. State Facility's ID											
10. US EPA ID Number CT P 009717604						F. Facility's Phone 203-621-8383											
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.					
a. RO Waste Paint (F003, F005) Flammable Liquid, UN 1263						005 DM 00275		C				F003 F005					
b. RO Waste Paint Related Material (F003) Flammable Liquid UN 1263						002 DM 00110		G				F003					
c.																	
d.																	
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above											
a. paint fillers, pigments,						a.											
b. xylene, petroleum distillate						b.											
c.						c.											
d.						d.											
15. Special Handling Instructions and Additional Information																	
11a) PIN 020034-ID b) PIN 020032-FD																	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State law and 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 HOMER KINGSBURY						Signature Homer H Kingsbury				Month Day Year 12/6/88							
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name KEVIN E. DURAN JR.				Signature Kevin E Duran Jr.				Month Day Year 12/6/88			
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name				Signature				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 9																	
Printed/Typed Name ALLAN B. PETERSON						Signature Allan B. Peterson				Month Day Year							

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No V.T.P.00000172700001	Manifest Document No 000001	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
3 Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602				A. State Manifest Document Number CT C 0208645		
4 Generator's Phone (302) 328-2087	5 Transporter 1 Company Name C.M. Laboratories, Inc.		6 US EPA ID Number ME D 0 8 3 1 7 9 9 1 5	B. State Facility's ID CT D 0 0 9 7 1 7 6 0 1		
7 Transporter 2 Company Name		8 US EPA ID Number		D. Tran. Phone (302) 772-3680		
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				E. State Tran. ID		
10 US EPA ID Number				F. Tran. Phone		
11 US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)				12 Containers	13 Total Quantity	14 Unit Wt./Vol
				No.	Type	Waste No.
a PO Waste Paint (EPA Ignitability) Combustible Liquid UN 1263				003	PM	001.65 G D001
b PO Hazardous Waste Solid, n.o.s. (EPA Ignitability) CPM-E NA 0189				001	PM	0.0050 C D001
c Non Hazardous, Non Regulated Material Hazard Class: Not Applicable (R/HA Number: None)				004	PM	01.600 NONE
d PO Waste Paint (F003, F005) Flammable Liquid UN 1263				001	PM	0.0055 G F003 F005
Additional Descriptions for Materials Listed Above				K Handling Codes for Wastes Listed Above		
a pigments, fillers, paint oils, mineral spirits				a. rubber, tar, fillers		
b paint chips, sand				c. water, paint pigments & oils, ink, tobacco, xylene		
15. Select Handling Instructions and Additional Information						
11a) PIN 017189-ID c) PIN 017185-ID 11b) PIN 017186-ID d) PIN 017184-FD						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by their proper name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway, air, rail, water, or other appropriate international and national government regulations, and all applicable State laws and regulations.						
I, the undersigned, generator, 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 appropriate, and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and potential adverse effects on 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 I have selected the treatment, storage, or disposal method that is available to me and that I can afford.						
Signature				Month Day Year		
[Signature]				11/30/78		
17. Transporter Acknowledgement - Receipt of Materials						
Printed Name				Signature		
Kevin E. Dean Sr.				[Signature]		
Signature				Month Day Year		
[Signature]				11/30/78		
18. Discrepancy/Exception Space						
19. Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19						
Printed Name				Signature		
[Signature]				[Signature]		
Signature				Month Day Year		
[Signature]				[Signature]		

COPY 5

CT C 0208645

DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No V.T.P.0.0.0.0.1.7.2.7.0.0.0.1		Manifest No 0.0.0.1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State law			
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602						A. State Manifest Document Number CT C 0208646					
4 Generator's Phone: 302 828-2878						B. State Code (EPA Region) 01					
5 Transporter 1 Company Name C.M. Laboratories, Inc.				6 US EPA ID Number M.P.D.0.8.3.1.7.9.9.4.5		D. Tran. Phone 302 772-3689					
7 Transporter 2 Company Name				8 US EPA ID Number		E. State Phone					
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489						10 US EPA ID Number CT D 0 9 7 1 7 6 0 4					
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity Unit Wt./Vol.		14. Waste No.	
a. PC Waste Combustible Liquid, n.o.s. (EPA Ignitability) Combustible Liquid NA 1993						001 PM 00055		G		D 001	
b. PC Waste Combustible Liquid, n.o.s. (EPA Ignitability) Combustible Liquid NA 1993						001 PM 00055		G		D 001	
c. PC Waste Kerosene (EPA Ignitability) Combustible Liquid UN 1223						001 PM 00055		G		D 000 1	
d. Non Hazardous, Non Regulated Material Hazard Class: Not applicable UN/NA Number: None						001 PM 00055		G		NONE	
Additional Descriptions for Materials Listed Above						15. Handling Codes for Wastes Listed Above					
a. petroleum distillate, paint oils, pigments						a. U					
b. aromatic amines, etc. (epoxy) paper, oil						b. U					
16. Special handling instructions and additional information						17. Signature					
Mail PIN 017180-ID c) PIN 017190-ID or PIN 017182-ID d) PIN 017188-ID						Signature: <i>[Signature]</i> Month Day Year: 12 07 89					
18. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper name, hazard class and hazard label, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable Federal, State and local government regulations, and all applicable State laws and regulations.						19. Signature					
I am a large quantity generator, and I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be appropriate under health and environmental protection. OR, I am a small quantity generator, I have made a good faith effort to minimize my waste generation and disposal, and I have made a good faith effort to reduce the volume and toxicity of waste generated to the degree I can afford.						Signature: <i>[Signature]</i> Month Day Year: 12 07 89					
20. Transporter 1 Acknowledgment of Receipt of Materials						21. Signature					
Printed Typed Name: <i>[Signature]</i>						Signature: <i>[Signature]</i> Month Day Year: 12 07 89					
22. Transporter 2 Acknowledgment of Receipt of Materials						23. Signature					
Printed Typed Name						Month Day Year					
24. Facility Acknowledgment of Receipt of Hazardous Materials						25. Signature					
Printed Typed Name						Month Day Year					
26. Facility Acknowledgment of Receipt of Hazardous Materials (except as noted in item 19)						27. Signature					
Printed Typed Name						Month Day Year					

COPY 5

CT C 0208646

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building
 Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. V.T.P.0.0.0.0.0.2.0.1.0 0.0.0.0.1	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law	
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602			A. State Manifest Document Number CT 0208643		B. State Manifest Document Date 12/7/88	
4 Generator's Phone (802) 828-2078	6. US EPA ID Number M.E.D.0.8.3.1.7.9.9.4.5		D. Tran. Phone 828-2078		E. State File ID	
5 Transporter 1 Company Name C.M. Laboratories, Inc.			8. US EPA ID Number		F. Tran. Phone	
7 Transporter 2 Company Name			10. US EPA ID Number		G. State Facility's ID	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489			10. US EPA ID Number CTD009717604		H. Facility's Phone	
11 US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No.	13. Total Quantity	14. Unit	15. State No.
a. Hazardous Waste Solid, a.c.s. CRM-E NA 3189			218	DM	07200	P
Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above			
a. crack filler (tar), vegetation, dirt, sand, soil			a. S			
15. Special Handling Instructions and Additional Information			16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and all applicable State laws and regulations.			
11a) PIN 017555-ID			I am a large quantity generator, that is, 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 also offers:			
Printed/Typed Name JOSEPH TALBOT			Signature <i>Joseph Talbot</i>		Month Day Year 12 7 88	
17 Transporter 1 Acknowledgement Receipt of Materials			Signature <i>Kevin E Duran Sr</i>		Month Day Year 12 7 88	
Printed/Typed Name KEVIN E DURAN SR			Signature <i>Kevin E Duran Sr</i>		Month Day Year 12 7 88	
18 Transporter 2 Acknowledgement Receipt of Materials			Signature		Month Day Year	
Printed/Typed Name			Signature		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 Kevin E Duran Sr			Signature <i>Kevin E Duran Sr</i>		Month Day Year 12 7 88	

COPY 5

CT C 0208643

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste Manifest Program, State Office Building
 Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No V. T. P. 0. 0. 0. 0. 0. 1. 9. 5. 4. 0. 0. 0. 1		Manifest Document No 000011		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State law					
		Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602		6. US EPA ID Number M. E. D. 0. 3. 3. 1. 7. 9. 9. 4. 5		A. State Manifest Document Number CT C 0208644		B. State Gen ID (Date of Approval) STATE OF VERMONT District Engineer's Office					
4. Generator's Phone (802) 828-2078		7. Transporter 1 Company Name C.M. Laboratories, Inc.		8. US EPA ID Number M. E. D. 0. 3. 3. 1. 7. 9. 9. 4. 5		C. State ID No ME 53171		D. Tran. Phone 802 85-3885					
5. Transporter 2 Company Name		8. US EPA ID Number		E. State Tran. ID		F. Tran. Phone		G. State Facility's ID					
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10. US EPA ID Number C. T. D. 0. 0. 9. 7. 1. 7. 6. 0. 4		H. Facility's Phone 203-671-8203		I. State Facility's ID		J. Facility's Phone					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt./Vol		15. Waste No.	
a. RC Waste Gasoline Flammable Liquid UN 1203 (EPA Ignitability)						001 D 100010		G		0001		0001	
d. Hazardous Waste Liquid, n.o.s. ORM-E NA 9189						001 D 100050		G		0001		0001	
c. Non Hazardous, Non Regulated Material Hazard Class: Not Applicable UN/NA Number: None						001 D 1000525		P		0001		0001	
d. Non Hazardous Material, Non Regulated Material Hazard Class: Not Applicable UN/NA Number: None						001 D 1000200		P		0001		0001	
Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a. water, clay, sand						a. 1 b. 2 c. 3 d. 4							
b. water, petroleum oil, dirt, grease, 100% charcoal						a. 1 b. 2 c. 3 d. 4							
15. Special Handling Instructions and Additional Information 11a) PIN 017542-AD c) PIN 017103-AD b) PIN 017541-AD d) PIN 017192-AD													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are, in all respects, in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations. I, James E. Dean , generator, certify that I have a program in place to control 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, I am a small quantity generator, I have made a good faith effort to minimize my waste generation and selected the best waste management method that is available to me, including recycling.													
Printed/Typed Name James E. Dean						Signature <i>James E. Dean</i>						Month Day Year 11/20/88	
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name Kevin E. Dean						Signature <i>Kevin E. Dean</i>						Month Day Year 11/20/88	
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name						Signature						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 Kevin E. Dean						Signature <i>Kevin E. Dean</i>						Month Day Year 11/20/88	

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER U.S. COAST GUARD 1 800 424 8802 FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338

COPY 5
CT C 0208644



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building
 Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.) FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. V.T.P.00.000.1.822.00.00.1	Manifest Document No. 00001	2. Page 1 of	Information in the shaded areas is not required by Federal law but may be required by State law.
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State Street Montpelier VT 05602				A. State Manifest Document Number CT-C-0208602	B. State Job ID (EPA Form 351) ME E38171
4. Generator's Phone (802) 828-2978				C. State Job ID (EPA Form 351) ME E38171	
5. Transporter 1 Company Name C.M. Laboratories Inc		6. US EPA ID Number MEP083179945		D. Tran. Phone 267-777-3659	E. State Tran. ID
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Tran. ID	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc Lazy Lane, Southington, Ct 06489				G. State Facility's ID 003-621-8393	
10. US EPA ID Number CT.D.0.09.7.1.7.604				H. Facility's Phone	
11. US DOT Description (Including Proper Shipping Name, hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt./Vol
a. Hazardous Waste Solid, n.p.s. ORM-E NA 9189		No. Type		Quantity	Waste No.
				00.60.00240.0	P NONE
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
a. Sand, water, petroleum Distillates		a. 201			
b.		b.			
15. Special Handling Instructions and Additional Information 11A) P.N 017548-ID					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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 to the degree economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which will minimize 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 waste generated and I have selected the best waste management method that is available to me and that I can afford.					
Printed/Typed Name PAUL E Gould		Signature <i>Paul E Gould</i>		Month Day Year 12 08 88	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name KEVIN E DEAN SR		Signature <i>Kevin E Dean</i>		Month Day Year 12 08 88	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		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 Tom N...					
Printed/Typed Name		Signature		Month Day Year	

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP., OIL AND CHEMICAL SPILLS AT (203) 566-3338
 FOR SPILLS OUTSIDE CONNECTICUT, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1 800 121 8802
 IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1 800 121 8802

COPY 5
 CT C 0208602



**STATE OF VERMONT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106**

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. V.T.P. 00-000-1848	Manifest Document No. 00-001	2. Page 1 of	Information in the shaded areas is not required by Federal law but may be required by State law.
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St. Montpelier VT 05602				A. State Manifest Document Number CT C 0208603	
4. Generator's Phone (302) 828-2078		5. Transporter 1 Company Name C.M. Laboratories, Inc.		B. State Gen. ID (and address) Dist. + Highway Garage Bethel Vermont 05322	
6. US EPA ID Number IME D 083179945		7. Transporter 2 Company Name		C. State Transit ID ME F38171	
8. US EPA ID Number		9. Designated Facility Name and Site Address Solvents Recovery Service of New England, INC Luzy Lane Southbury CT 06489		D. Tran. Phone 207-712-3689	
10. US EPA ID Number CT D 009717604		11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		E. State Tran. ID	
12. Containers		13. Total Quantity		14. Unit Wt./Vol	
No. Type		Quantity		Waste No.	
a. Hazardous waste liquid, nos ORM-E NA 9189		0.020		0.800 P NONE	
b. Hazardous waste solid, nos ORM-E NA 9189		0.060		0.400 P NONE	
c. Hazardous waste solid, nos ORM-E NA 9189		0.020		0.800 P NONE	
d. Hazardous waste solid, nos ORM-E NA 9189		0.010		0.400 P NONE	
Additional Descriptions for Materials Listed Above: Water, dirt, grease a. TAR preservative b. roofing tar c. plastic film		K. Handling Codes for Wastes Listed Above			
Special Handling Instructions and Additional Information: 1) a) PIN 017543-AD b) PIN 017545-AD c) PIN 017547-AD d) PIN 017544-AD		TAR, steel gravel, sand Dirt, Sand Epoxy solids			
15. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway, according to applicable international and national government regulations, and all applicable State laws and regulations.					
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, insofar as it is practicable, 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 by using the best waste management method that is available to me and that I can afford.					
Printed/Typed Name Stanley E Robinson		Signature <i>Stanley E Robinson</i>		Month Day Year 11 10 88	
16. Transporter 1 Acknowledgement of Receipt of Materials					
Printed/Typed Name Kevin E. DeChauve		Signature <i>Kevin E DeChauve</i>		Month Day Year 11 10 88	
17. Transporter 2 Acknowledgement of Receipt of Materials					
Printed/Typed Name XXXXXXXXXXXXXXXX		Signature <i>XXXXXXXXXXXXXXXX</i>		Month Day Year 11 10 88	
18. Discrepancy Indication Space					
19. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 13					
Printed/Typed Name		Signature		Month Day Year	

COPY 5

CT C 0208603

STATE OF CONNECTICUT
 DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building
 Hartford, CT 06106

FOR STATE USE ONLY

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. V7098073080800001	Manifest Document No. 000001	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602			A. State Manifest Document Number CT C-0208612		B. State DOT Hazardous Waste Manifest Number 000001	
4. Generator's Phone 802 828-2087	5. Transporter 1 Company Name C.M. Laboratories, Inc.	6. US EPA ID Number MED087179945	D. Tran. Phone 802 828-2087		E. State Facility ID CT 021-1383	
7. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489			10. US EPA ID Number CT D O O 9 7 1 7 6 0 4		G. State Facility's ID CT 021-1383	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. Hazardous Waste Solid, n.o.s. CM-E RA 9189			5	0.9000	KG	RA 9189
b. Waste Flammable Liquid, n.o.s. (F003) Flammable Liquid UN 1993			2	2.0118	G	F003
c. Waste Flammable Liquid (F003, F005) Flammable Liquid, UN 1993			3	1.65	G	F003 F005
Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above			
a. asphalt 75%, steel tire 25%			a.			
b. xylene 75%, asphalt 25%			b.			
16. Special Handling Instructions and Additional Information						
1a) PIN 017191-ED c) PIN 015624-ED b) PIN 015625-ED						
17. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the shipping name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway according to applicable Federal and national government regulations, and all applicable State laws and regulations. I, the undersigned generator, 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 and technically appropriate 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 I have used the treatment method that is available to me and that I can afford.						
Printed Name George S. Conner			Signature <i>George S. Conner</i>		Month Day Year 11/9/29/88	
18. Transporter 1 Acknowledgment - Receipt of Materials			Signature <i>Kevin E. Moran</i>		Month Day Year 11/9/29/88	
Printed Name Kevin E. Moran Sr.			Signature		Month Day Year	
19. Discrepancies and Other Issues						
20. Transporter 2 Acknowledgment - Receipt of Materials						
Printed Name			Signature		Month Day Year	
21. Generator's Certification of receipt of hazardous materials covered by this manifest except as noted in item 19						
Printed Name			Signature		Month Day Year	

COPY 5

CT C 0208612

**Hazardous Waste Manifest Program. State Office Building
Hartford, CT 06106**

Please type (or print) Form designed for use on elite (12-pitch) typewriter.

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No V.T.P.0.0.0.0.0.1.8.7.2.0.0.0.0.1		Manifest Document No 0.0.0.0.1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
3. Generator's Name and Mailing Address State of Vermont Agency of Transportation 3 State St., Montpelier, VT 05602					A. State Manifest Document Number CT C 0208616		
4. Generator's Phone 302 328-2087					B. State Facility's ID Number 0208616		
5. Transporter 1 Company Name C.M. Laboratories, Inc.			6. US EPA ID Number M.E.D.0.8.3.1.7.9.9.4.5		C. State Facility's ID Number 0208616		
7. Transporter 2 Company Name			8. US EPA ID Number		D. Tran. Phone 302 328-2087		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane Southington, CT 06489			10. US EPA ID Number C.T.D.0.0.9.7.1.7.6.0.4		E. State Facility's ID Number 0208616		
11. JS DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)					12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
a. RC Hazardous Waste Liquid, n.o.s. (P002) OPN-E NA 9189					001	DM 00055	G
b. Hazardous Waste Solid, n.o.s. OPN-E NA 9189					001	DM 00525	P
c.							
15. Additional Descriptions for Materials Listed Above methylene chloride 25%, cresylic acid 25%, water 25%, paint 25%					16. Handling Codes for Wastes Listed Above		
b. petroleum oil 0-10%					b.		
15. Special Handling Instructions and Additional Information 11a) PER 016597-AD b) PER 016596-AD							
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, packaged, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.							
17. I am a large quantity generator, that is, I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically and technically feasible; I have selected the practical method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, I am a small quantity generator, I have made a good faith effort to minimize my waste generation and I have used the best waste management method that I have selected to me and that I can afford.							
Printed/Typed Name George E. Conroy				Signature <i>George E. Conroy</i>		Month Day Year 09 29 88	
Printed/Typed Name Kevin E. Duran				Signature <i>Kevin E. Duran</i>		Month Day Year 10 29 88	
18. Discrepancy indicator (if any)							
19. Discrepancy indicator (if any)							
20. I am a large quantity generator, I hereby certify that the contents of this manifest are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.							
Printed/Typed Name				Signature		Month Day Year	

FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338
FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338
IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER U.S. COAST GUARD (800) 368-5858

COPY 5

CT C 0208616

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0167836

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No VT P 00000183400001	Manifest Document No.	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St. Montpelier, VT 05602			A. State Manifest Document Number CT C 0167836		B. State Gov. Dept. of Transportation, Dept. of Transportation, 17, New Haven, VT 05472	
4 Generator's Phone (802) 828-2087	5 Transporter 1 Company Name C.M. Laboratories, Inc.		6 US EPA ID Number ME D 083179945	C. State Trans. ID No. 17-112-3000		
7 Transporter 2 Company Name		8 US EPA ID Number		D. Tran. Phone 802-722-3000		
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lasy Lane, Southington, CT 06489			10 US EPA ID Number CT D 009717604		E. State Trans. ID No.	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12 Containers No.	13 Total Quantity	14 Unit Wt/Vol	Waste No.
a NO Waste Containable Liquid, n.o.s. (EPA Ignitability) Combustible LIQUID NA 1993 Liquid			001	0.0055	G	0001
Additional Descriptions for Materials Listed Above petroleum oil 90-100 dissolved rubber 0-100			K. Handling Codes for Wastes Listed Above T50			
15 Special Handling Instructions and Additional Information 11a) PID 015955-7D			16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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 EUGENE CLARK		Signature <i>Eugene Clark</i>		Month Day Year 062288		
17 Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name KEVIN E. DEAN SR		Signature <i>Kevin E. Dean</i>		Month Day Year 062288		
18 Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		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 ANDREW PETERSON						
Printed/Typed Name		Signature <i>Andrew Peterson</i>		Month Day Year		

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1 800 424 8802

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. VT 10000018480000	Manifest Date 06/22/88	2 Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law.
3 Generator's Name and Mailing Address State of Vermont-Agency of Transportation 113 State St. Montpelier, VT 05602				A State Manifest Document Number CT C 0167837	
4 Generator's Phone 828-2087		6 US EPA ID Number ME D 083179945		B State Gen. ID District Highway Garage	
5 Transporter 1 Company Name C.M. Laboratories, Inc.		8 US EPA ID Number		C State Tran. ID VT	
7 Transporter 2 Company Name		10 US EPA ID Number		D Tran. Phone 207-772-3000	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		12 Containers		E State Tran. ID	
		13 Total Quantity		F Tran. Phone	
		14 Unit Wt/Vol		G State Facility's ID	
		1 Waste No.		H Facility's Phone 203-621-8383	
11 US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12 Containers		13 Total Quantity	
		14 Unit Wt/Vol		1 Waste No.	
a Hazardous Waste Solid, n.o.s. CM-E NA 9189		002 DM 00550 P		NONE	
b RC Waste Combustible Liquid, n.o.s. (EPA Ignitability) Combustible Liquid NA 1893		001 DM 00025 G		D001	
c Hazardous Waste Liquid, n.o.s. CM-E NA 9189		001 DM 00055 G		NONE	
d RC Waste Flammable Liquid, n.o.s. (F005) Flammable Liquid UN 1993		001 DM 00055 G		F005	
15 Additional Descriptions for Materials Listed Above				K Handling Codes for Wastes Listed Above	
a rubberized asphalt emulsion 100% water 80-100, manufacturer's Not a RCRA regulated waste tar emulsion (Sludge) 10-20%				a.	
b. oily water				b.	
c. Not RCRA regulated waste				c.	
d. Not RCRA regulated waste				d.	
e. Not RCRA regulated waste					
16 Special Handling Instructions and Additional Information					
a) PIN 016031-ID (Drum #4)				c) PIN 016030-AD (Drum # 2)	
b) PIN 016029-AD (Drum #1)				d) PIN 016032-ID (Drum # 5)	
17 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.					
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 Stanley Russ		Signature <i>Stanley Russ</i>		Month Day Year 06/22/88	
18 Transporter 1 Acknowledgement of Receipt of Materials					
Printed Typed Name Kevin E. Quinn Jr		Signature <i>Kevin E. Quinn Jr</i>		Month Day Year 06/22/88	
19 Transporter 2 Acknowledgement of Receipt of Materials					
Printed Typed Name		Signature		Month Day Year	
20 Discrepancy Indication Space					
21 Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19					
Printed Typed Name Walter J. Peterson		Signature <i>Walter J. Peterson</i>		Month Day Year 06/22/88	

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0167837

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**

Please print or type. Form designed for use on elite (12-pitch, typewriter.)

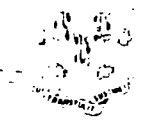
UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. 185100	2 Page 1 of 1	3 Information in the shaded areas is not required by Federal law, but may be required by State law.
Generator's Name and Mailing Address State of Vermont-Agency of Transportation- 133 State St. Montpelier, VT 05602		4 Generator's Phone 802 223-2087	A. State Manifest Document Number CT C 0167840	
5 Transporter 1 Company Name C.M. Laboratories, Inc.		6 US EPA ID Number ME0083179945	B. State Generator's Name, Address, and City, State, and Zip Route 14, North Montpelier, VT	
7 Transporter 2 Company Name		8 US EPA ID Number	C. State Manifest Document No.	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lory Lane, Southington, CT 06489		10 US EPA ID Number CE0009717604	D. Tran. Phone 860 232-2089	
			E. State Tran. ID	
			F. Facility's Phone 860 421-8383	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type	13. Total Quantity	14. Unit Wt./Vol. Waste No.
a. RQ Waste Combustible Liquid, n.o.s. (EPA Ignitability) Combustible Liquid NA 1993		001 DM	00050	G 8801
b. RQ Waste Combustible Liquid, n.o.s. (EPA Ignitability) Combustible Liquid NA 1993		002 DM	00110	G 8801
c. RQ Waste Flammable Liquid, n.o.s. (FC03, FC05) Flammable Liquid UN 1993		001 DM	00055	G 7003 7005
HAZARDOUS WASTE LIQUID, n.o.s. (FC03, FC05) Flammable Liquid UN 1993		001 DM	00055	G 7003 7005
Additional Descriptions for Materials Listed Above petroleum distillates 500		K. Handling Codes for Wastes Listed Above		
a. water 500		a. 3		
b. alkyd paint 500		b. 3		
15 Special Handling Instructions and Additional Information 1) UN 116029-ED (Drum # 1)		c. 3		
2) UN 116027-ED (Drum # 2)		d. 3		
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper UN or NA name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.				
I, the above named generator, 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 reasonable, 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 to adopt the best waste management method that is available to me and that I can afford.				
Printed/Typed Name ROBERT CAMERON		Signature <i>Robert Cameron</i>		Month Day Year 06 22 88
17 Transporter Acknowledgement of Receipt of Materials				
Printed/Typed Name KEVIN E. DEAN JR.		Signature <i>Kevin E. Dean Jr.</i>		Month Day Year 06 22 88
18 Transporter 2 Acknowledgement of Receipt of Materials				
Printed/Typed Name		Signature		Month Day Year
19 Discrepancy/Correction/Update				
20 Shipper/Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19				
Printed/Typed Name		Signature		Month Day Year

FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0167840

COPY 5: TRANSPORTER 1 - Retained by Transporter

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. V 77800000185000222	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
Generator's Name and Mailing Address State of Vermont Agency of Transportation-133 State St. Montpelier, VT 05602			A. State Manifest Document Number CT C 0167841		
4. Generator's Phone 802 328-2087	5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME D 0 8 3 1 7 9 9 4 5		D. State Manifest Agency Designation VT
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Manifest Agency Designation	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489			10. US EPA ID Number CT D 0 0 9 7 1 7 6 0 4		G. State Facility's ID CT D 0 0 9 7 1 7 6 0 4
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
a. Waste Oil, n.o.s. Combustible Liquid NA 1270			001 DN	00055 G	EA 02
b. Waste Oil, n.o.s. Combustible Liquid NA 1270			003 DN	00240 G	EA 02
c.					
d.					
Additional Descriptions for Materials Listed Above petroleum based oil 90-250 a. sand, stones, debris 5-100 petroleum based oil 90-1000 b. dirt 0-100			K. Handling Codes for Wastes Listed Above T50 330 730 bladder		
15. Special Handling Instructions and Additional Information 11a) PIN 016034-ID (Drum # 1) b) PIN 016050-ID (Drum # 1)					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations. 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 ROGER E HUNT		Signature <i>Roger E Hunt</i>		Month Day Year 06 22 88	
17. Transporter 1 Acknowledgment - Receipt of Materials Printed/Typed Name Kevin E. Duran Sr.		Signature <i>Kevin E. Duran Sr.</i>		Month Day Year 06 22 88	
18. Transporter 2 Acknowledgment - Receipt of Materials Printed/Typed Name		Signature		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 Debra B. Peterson					
Printed/Typed Name		Signature <i>Debra B. Peterson</i>		Month Day Year 06 22 88	

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3338
IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER AT (800) 425-8802

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0167841

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**

Please print or type. Form designed for use on elite (12-pitch) typewriter.

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. VT D 9 8 0 6 6 7 6 7 9 0 0 0 0 0 0 0	Manifest 0000000000	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
Generator's Name and Mailing Address State of Vermont-Agency of Transportation 133 State St. Montpelier, VT 05602				A. State Manifest Document Number CT-C-0167858		
4 Generator's Phone 302 828-3669		6 US EPA ID Number ME D 0 8 3 1 7 9 9 4 5		B. State Facility's ID CT D 0 9 9 7 1 7 6 0 4		
5 Transporter 1 Company Name C.M. Laboratories, Inc.		8 US EPA ID Number		C. State Facility's ID		
7 Transporter 2 Company Name		10 US EPA ID Number		D. Tran. Phone		
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lory Lane, Southington, CT 06489				E. State Tran. ID		
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12 Containers No. Type	13 Total Quantity	14 Unit Wt. Vol.
a. 30 Waste (Combustible Liquid (HFA Ignitability) Combustible Liquid NA 1993				002 DM	00110	G 0001
b. WASTE FLAMMABLE LIQUID, n.o.s. (F005) Flammable Liquid NA 1993				001 DM	00055	G F005
c. 30 Waste Flammable Liquid, n.o.s. (F005) Flammable Liquid NA 1993				004 DM	00220	G F005
15 Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. coal tar creosote				a.		
b. methyl ethyl ketone 50-600				b.		
c. pigments, fillers 20-600				c.		
16 Special Handling Instructions and Additional Information				d.		
17 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.				18 Transporter 1 Acknowledgement / Receipt of Materials		
Printed/Typed Name: DAVID J. BLACKMORE				Signature: <i>David J. Blackmore</i>		Month Day Year: 052688
19 Facility Owner / Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19				Signature: <i>Kevin E. Duran Sr.</i>		Month Day Year: 052688
20 Facility Owner / Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19				Signature:		Month Day Year:

FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP OIL AND CHEMICAL SPILLS AT (203) 566-3338

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0167858

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. VT 0000001713	Manifest Document No. 0125372	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
3 Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St. Montpelier, VT 05602			A. State Manifest Document Number CT C-0125372		
4 Generator's Phone (802) 828-2067			B. State Gen. ID 123 Winner Site		
5 Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number MEP033179945		C. State Facility ID 061575	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Tran. Phone 802-372-3689	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489			10. US EPA ID Number CTD009717604		
			E. State Tran. ID		
			F. Tran. Phone		
			G. State Facility's ID 0-1-14		
			H. Facility's Phone 860-621-8383		
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit
			No.	Type	Wt./Vol
					Waste No.
a. Non Hazardous Solid Hazard Class: N/A UN/NA No. N/A			009	DM04500	P N/A
b. Non hazardous solid Hazard Class: N/A UN/NA No. N/A			006	DM02400	P N/A
c. Hazardous Waste Liquid NOS ORM-E NA 9129			005	DM02500	P N/A
d. Non hazardous solid Hazard Class: N/A UN/NA No. N/A			004	DM01300	P N/A
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a. PIN 15213 GD			a. 001		
b. PIN 15214 GD			b. 001		
c. PIN 15157 FD			c. 001		
d. PIN 15208 GD			d. 001		
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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 STACIA F...		Signature <i>[Signature]</i>		Month Day Year 12 12 88	
17. Transporter 1 Acknowledgement of Receipt of Materials					
Printed/Typed Name Kevin E. Duran Jr		Signature <i>[Signature]</i>		Month Day Year 12 12 88	
18. Transporter 2 Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		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		Month Day Year	

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3338
IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER U.S. COAST GUARD 1-800-424-8802

COPY 5: TRANSPORTER 1 - Retained by Transporter
CT C 0125372

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. VT P 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Manifest Document No. 0 2 0 8 6 1 0	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State Street, Montpelier, VT 05602			A. State Manifest Document Number CT C 0208610		B. State Gov ID# (Site Address) District Hwy. Montpelier, VT	
4 Generator's Phone (802) 828-2078	5 Transporter 1 Company Name C.M. Laboratories, Inc.	6. US EPA ID Number ME P 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	C. State Tran. ID# ME F 3 8 1 7 1		D. Tran. Phone 707 772-3689	
7 Transporter 2 Company Name	8. US EPA ID Number	E. State Tran. ID#		F. Tran. Phone		
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lary Lane, Southington, CT 06489			10 US EPA ID Number CT P 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		G. State Facility's ID# 0 2 0 8 6 1 0	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13 Total Quantity	14 Unit	15 Waste No
			No.	Type	Wt./Vol	
a. Waste Paint Related Material Combustible Liquid NA1263			001	004	002	NONE
b. Hazardous Waste Solid, n.o.s. ORM-E NA9189			001	000	050	NONE
c. Waste Paint Combustible Liquid UN1263			001	004	002	NONE
d.						
16 Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above			
a. oils, fillers, 100%			a.			
b. gravel, asphalt, petroleum distillate			b.			
c. oils, fillers, pigments			c.			
d.			d.			
17 Special Handling Instructions and Additional Information						
11a) PIN 016583-FD(#6) c) PIN 016586-FD(#9) b) PIN 016505-ID(#8)						
18 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway, according to applicable international and national government regulations, and all applicable State laws and 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 that is economically practicable and that I have selected the practicable method of treatment, storage, and disposal currently available to me and that I am not aware of any other more practicable 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 determine the most appropriate method to select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name			Signature		Month Day Year	
Ronald Bluff			<i>[Signature]</i>		11/15/91	
19 Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name			Signature		Month Day Year	
Kevin E. Quinn			<i>[Signature]</i>		11/15/91	
20 Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name			Signature		Month Day Year	
21 Discrepancy Indication Space						
22 Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 3						
Printed/Typed Name			Signature		Month Day Year	
[Name]			<i>[Signature]</i>		[Date]	

COPY 5

CT C 0208610



VERMONT AGENCY OF ENVIRONMENTAL CONSERVATION
HAZARDOUS WASTE MANAGEMENT PROGRAM

West Building, 103 South Main Street
Waterbury, Vermont 05676

(802)244-8702

Please print or type (Form designed for use on elite 12-pitch typewriter)

Form Approved OMB No 2050-0039 Expires 9-30-88

In the event of an emergency, contact the National Response Center 1-800-424-8802 or, if within Vermont, The Vermont Department of Public Safety 1-800-641-5005.

Copy 5: Transporter 1
VT 0022249

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. VTB0000018	Manifest Document No. 900103	Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator Name, Address, City, State, Zip State Dept of Vermont Agency of Transportation, Dept. of Motor Vehicles 120 State St., Montpelier, VT 05603		6. US EPA ID Number		A. State Manifest Document Number VT 0022249		
4. Generator's Phone ()		6. US EPA ID Number MEID083179945		B. State Generator's ID District Hwy. Garage, Rt. 2 Middlesex, VT 05750		
5. Transporter 1 Company Name C.M. Laboratories, Inc.		8. US EPA ID Number		C. State Transporter's ID		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 287-772-3689		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane Southington, CT 06489		10. US EPA ID Number CTD009717604		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID		
				H. Facility's Phone 203-671-8383		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.	
a. RC Waste Flammable Solid, n.o.s. (EPA Ignitability) Flammable Solid UN1325		001 00500		P	B901	
J. Additional Descriptions for Materials Listed Above contains triethylamine polyamines, diethyl toluene diamine		K. Handling Codes for Wastes Listed Above 301				
15. Special Handling Instructions and Additional Information 11a) PBN 016603-ID						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest are true, correct, and accurate, as described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable state law and regulations. 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 most feasible, efficient, treatment, storage, or disposal alternative available to me which minimizes the present and future threat to human health and the environment. OR, 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 Chifton Coates		Signature <i>Chifton Coates</i>		Month Day Year 08/12/88		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name KEVIN E. DURAN SR		Signature <i>Kevin E Duran Sr</i>		Month Day Year 08/12/88		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		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 <i>Chifton Coates</i>						
Signature <i>Chifton Coates</i>		Month Day Year 08/12/88				

DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM. State Office Building
Hartford, CT 06106

Use type (or print) (Form designed for use on elite (12-pitch) typewriter)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No 07-000-0-3-0-6-5-7-5-5-1-10-0-0-0-1		Manifest Document No 10-0-0-0-1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
3. Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State Street, Montpelier, VT 05602					A. State Manifest Document Number CT C 0208611		
4. Generator's Phone 302 228-2078					B. State Gen. ID (City, Address) District Bay Montpelier, VT 05701		
5. Transporter 1 Company Name C.M. Laboratories, Inc.			6. US EPA ID Number MS 000 9 7 1 7 0 9 9 5		C. State Facility ID AE E38171		
7. Transporter 2 Company Name			8. US EPA ID Number		D. Tran. Phone 802 772-1889		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane Southington, CT 06489			10. US EPA ID Number CT 000 0 9 7 1 7 6 0 3		E. State Tran. ID		
					F. Tran. Phone ()		
					G. State Facility's ID		
					H. Facility's Phone 863-671-8303		
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)					12. Containers		13. Total Quantity
					No.	Type	Unit Wt/Vol
a. HQ Hazardous Waste Solid, n.o.s. (EPA Ignitability) UN 189							
b. HQ Waste Flammable Solid, n.o.s. (F003, F005) Flammable Solid UN1275							0.09 by 0.200
c. Hazardous Waste Solid, n.o.s. UN 189							
d. Hazardous Waste Solid, n.o.s. UN 189							0.01 by 0.0249
14. Additional Descriptions for Materials Listed Above					K. Handling Codes for Wastes Listed Above		
a. driveway sealcoat					a. _____		
b. traffic paint, clay, soil, dirt					b. _____		
c. water 50%					c. _____		
d. tarmac/track 50%					d. _____		
e. asphalt cutback							
15. Special Handling Instructions and other information							
1a) UN 016106-ID(15,12)					c) UN 016226-ID(11,14)		
b) UN 016175-ID(1,2,4,7,10)					d) UN 016214-ID(8)		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this document are fully and accurately described above by proper shipping name, hazard class, package marked and labeled and that in all respects in proper condition for transport by highway according to applicable federal, state and national government regulations and all applicable State laws and regulations.							
I am a responsible party of the waste and I have determined the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the most appropriate treatment, storage, or disposal currently available to me which minimizes the present and future threat to man and the environment. OR, I am a responsible party of the generator and I have made a good faith effort to minimize my waste generation and disposal costs to the extent practicable.							
Printed/Typed Name Charles Fay					Signature Charles Fay		Month Day Year 083088
17. Transporter 1 (known as the driver) Printed/Typed Name Kevin E. Smith					Signature Kevin E. Smith		Month Day Year 083088
18. Transporter 2 (known as the driver) Printed/Typed Name					Signature		Month Day Year
19. Discrepancy Indication (Date)							
20. Facility Name (Name of the facility that accepted the hazardous materials covered by this manifest except as noted in item 19)							
Printed/Typed Name					Signature		Month Day Year

COPY 5

CT C 0208611

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building
 Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No V.T.P.0.0.0.0.0.1.5.5.610.0.0.0.	Manifest Document No. 0.0.0.0.	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
Generator's Name and Mailing Address State of Vermont Agency of Transportation 123 State St., Montpelier, VT 05602				A. State Manifest Document Number CT C-0208606	B. State Gen/ID No/Address Montpelier, VT	
4 Generator's Phone (902) 828-2087	5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number M.E.D.0.8.3.1.7.9.0.4.5	C. State Transporter No. MT 838171	D. Tran. Phone 774-3889	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Tran. ID		F. Tran. Phone
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				10. US EPA ID Number C.T.0.0.0.9.7.1.7.6.0.4	G. State Facility's ID 02-000-0000	
				H. Facility's Phone 860-621-8300		
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RC Waste Paint (EPA Ignitability) Combustible Liquid UN1263			001 DM 00600	P		0001
b. RC Waste Paint (EPA Ignitability) Combustible Liquid UN1263			002 DM 01100	P		0002
c. Hazardous Waste Liquid, n.o.s. CBM-E NA 9189			001	00600	P	0003
Additional Descriptions for Materials Listed Above mineral spirits, linseed oil, fillers, pigments			X. Handling Codes for Wastes Listed Above			
a. mineral spirits, linseed oil, fillers, pigments			b. traces of lead, oils, pigments and fillers			
c. mineral spirits, linseed oil, fillers, pigments			d.			
15. Special Handling Instructions and Additional Information 11a) PIN 016594-FD(010) b) PIN 016592-FD(10) 11) PIN 016593-FD(011)						
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, labeled, packaged and secured, and are in a condition for transport by highway according to applicable international and national government regulations and all applicable State laws and regulations.						
I am a responsible generator and I have implemented a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically and/or technically feasible. I have also adopted the most effective method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, I am a small quantity generator and I will make every effort to minimize my waste generation and to adopt the best waste management practice available to me.						
Printed/Typed Name				Signature		Month Day Year
17. Transporter 1 Acknowledgment (in receipt of materials)				Signature		Month Day Year
Printed/Typed Name				Signature		Month Day Year
18. Transporter 2 Acknowledgment (in receipt of materials)				Signature		Month Day Year
Printed/Typed Name				Signature		Month Day Year
19. Discrepancy Indication Space						
20. Facility Owner/Operator Certification: Receipt of hazardous materials covered by this manifest except as noted in item 19						
Printed/Typed Name				Signature		Month Day Year

COPY 5

CT C 0208606



**VERMONT AGENCY OF ENVIRONMENTAL CONSERVATION
HAZARDOUS WASTE MANAGEMENT PROGRAM**
West Building, 103 South Main Street
Waterbury, Vermont 05676
(802)244-8702

Please print or type Form designed for use on 11" x 17" (2-pitch) typewriter

Form Approved OMB No. 2050-0039 Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST		7 Uniformed Hazardous Waste Manifest Document No. 18690		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
1. Generator's Name and Mailing Address State of Vermont-Agency of Transportation, Dept. of Motor Vehicles 120 State St., Montpelier, VT 05603				A. State Manifest Document Number VT 0022248			
4. Generator's Phone 802 328-2087		6. US EPA ID Number MTD101831179945		B. State Generator's ID District Hwy. Garage Bldg. 2 Middlesex, VT		C. State Transporter's ID	
5. Transporter's Company Name C.M. Laboratories, Inc.				D. Transporter's Phone 207-772-3689			
7. Transporter's Company Name		8. US EPA ID Number		E. State Transporter's ID			
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				F. Transporter's Phone			
		10. US EPA ID Number ICTD101019171176014		G. State Facility's ID			
				H. Facility's Phone 203-621-8383			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers		13. Total Quantity	
				No. Type		14. Unit Wt./Vol	
				I. Waste No.			
a. RC Waste Paint (F005) Flammable Liquid UN1263				002 D M		01000 P F005	
b. RC Waste Flammable Solid, n.o.s. (F003, F005) Flammable Solid UN1265				001 D M		00500 P F003 F005	
c. RC Waste Petroleum Distillate (EPA Ignitability) Combustible Liquid UN1263				002 D M		00900 P D001	
d. Hazardous Waste Liquid, n.o.s. UN1918				015 D M		06000 P NONE	
15. Additional Descriptions of Materials Listed Above water 75% paint pigment, fillers tar, MEK, Toluene balance pigments, fillers, oils 90% MEK, Toluene, xylene 10%				K. Handling Codes for Wastes Listed Above oils-petroleum & vegetable kerosene tar emulsions, asphalt cutbacks			
16. Specific Handling Instructions and Additional Information a) PIN 16607-AD(#6) b) PIN 16599-AD(#7)				c) PIN 16605-FD(#9) d) PIN 16590-ID(#10)			
17. GENERATOR CERTIFICATION I, the undersigned, certify that the contents of this consignment are fully and accurately described above by the generator, and that the materials are properly packaged, labeled, and placarded in all respects in proper condition for transport by highway in accordance with applicable Federal, State and all applicable State law and regulations.							
18. I, the undersigned, 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 reasonable under the circumstances, and that I am currently using the best waste management practices available to me and that I can afford.							
Printed Name Clifton Gates				Signature <i>Clifton Gates</i>		Month Day Year 8 9 1988	
Printed Name Kevin E. Dumas				Signature <i>Kevin E. Dumas</i>		Month Day Year 08 11 1988	
19. I, the undersigned, 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 reasonable under the circumstances, and that I am currently using the best waste management practices available to me and that I can afford.							
Printed Name				Signature		Month Day Year	
20. I, the undersigned, 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 reasonable under the circumstances, and that I am currently using the best waste management practices available to me and that I can afford.							
Printed Name				Signature		Month Day Year	

In the event of a spill or emergency, contact the National Response Center 1-800-424-8802 and if within Vermont, The Vermont Department of Public Safety 1-800-641-5005

Copy 5: Transporter 1 VT 0022248



VERMONT AGENCY OF ENVIRONMENTAL CONSERVATION
HAZARDOUS WASTE MANAGEMENT PROGRAM
West Building, 103 South Main Street
Waterbury, Vermont 05676
(802)244-8702

Print or type (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2050-0039 Expires 9-30-88

In the event of a spill or emergency, contact the National Response Center 1-800-424-8802 and if within Vermont, The Vermont Department of Public Safety 1-800-641-5005

Copy 5: Transporter 1
VT 0022235

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. VT D 9 8 0 7 3 0 8 0 0 0 0 0 0 1		Manifest Document No. 1 of 1	Page 1 Information in the shaded areas is not required by Federal law.	
3 Generator's Name and Mailing Address State of Vermont - Agcy. of Transp., Central Garage 133 State Street Montpelier, VT 05602				A State Manifest Document Number VT 0022235		
4 Generator's Phone 802 828-2564				B. State Generator's ID Central Garage Barre-Montpelier Rd., Barre, VT		
5 Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME D 0 8 3 1 7 9 9 4 5		C. State Transporter's ID MR F38171		
7 Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone. (207) 772-3689		
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lary Lane Southington, CT 06489				E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID		
				H. Facility's Phone		
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12 Containers No. Type	13 Total Quantity	14 Unit Wt/Vol
a. RQ Waste Flammable Liquid, H.O.S. (P003) Flammable Liquid, UN 1993				0 0 2 DM	0 0 1 0 0	G P003
d. Non Hazardous Solid, N.O.S. Hazard Class; N/A UN N/A Number: N/A				0 0 4 CM	0 0 6 0 0	P N/A
Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
75% Xylene				a.		
25% Asphalt				c.		
75% clay				b.		
25% dried paint chips				d.		
15 Special Handling instructions and Additional Information 11 a) PIN015625-FD b) PIN015626-ID						
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 transportation according to applicable international and national government regulations, and all applicable State, law and 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, that the program is economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available. I am aware that the 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 the threat to the best waste management method that is available to me and that I can afford.						
Printed, Typed Name George S. Coombes				Signature <i>George S. Coombes</i>		
17 Transporter 1 Acknowledgement of Receipt of Materials						
Printed, Typed Name Kevin E Duran Sr				Signature <i>Kevin E Duran Sr</i>		
18 Transporter 2 Acknowledgement of Receipt of Materials						
Printed, Typed Name				Signature		
19 Discrepancy Indication Space						
20 Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted						
Printed, Typed Name [Signature]				Signature Date 9/3/88		

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST
1 Generator's US EPA ID No V.T.D.9.8.0.7.3.0.8.0.8
Manifest Document No 0.0.0.0.1
2 Page 1 of 1
Information in the shaded areas is not required by Federal law but may be required by State law.
3 Generator's Name and Mailing Address State of Vermont Agency of Transportation, 133 State St., Montpelier, VT 05602
A. State Manifest Document Number CT C 0208628
4 Generator's Phone 802 828-2087
5 Transporter 1 Company Name C.M. Laboratories, Inc.
6. US EPA ID Number N.E.D.0.8.3.1.7.9.9.4.5
6. State ID No VE F38171
7 Transporter 2 Company Name
8 US EPA ID Number
D. Tran. Phone 207 772-3689
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc., Lazy Lane, Southington, CT 06489
10. US EPA ID Number
G. State Facility's ID
H. Facility's Phone 203-621-8383
11 US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)
12. Containers No. Type 13 Total Quantity 14 Unit Wt./Vol 1. Waste No.
a RC Waste Flammable Liquid, n.o.s. (F005) Flammable Liquid UN 1993 0.01 D.M. 0.0055 G F005
b Hazardous Waste Solid 205 0.0250 NONE
Additional Descriptions for Materials Listed Above contains kerosene, paint solids, toluene, dirt, debris
K. Handling Codes for Wastes Listed Above
a. c
b. d
Special Handling Instructions and Additional Information
11a) RTN 017533-FD
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...
Transporter 1 Acknowledgement of Receipt of Materials
Printed Typed Name Signature Month Day Year
W E DEAN JR. Kevin E. Dean 11/10/88
Transporter 2 Acknowledgement of Receipt of Materials
Printed Typed Name Signature Month Day Year
Agency/Industry Name
Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 9
Printed Typed Name Signature Month Day Year

COPY 5

CT C 0208628

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No VT P 0 0 0 0 8 1 8 1 0 0 0 0 0 1	Manifest Duplicate No 0 0 0 0 1	2 Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law.		
3 Generator's Name and Mailing Address State of Vermont-Agency of Transportation 133 State St. Montpelier, VT 05602				A. State Manifest Document Number CT C-0167855			
4 Generator's Phone (802 328-2087)				B. State Gen. ID: CRICK RD			
5 Transporter 1 Company Name C.M. Laboratories, Inc.		6 US EPA ID Number ME D 0 8 3 1 7 9 9 4 5		C. State Tran. ID: ME E 3 9 1 7 1		D. Tran. Phone: (603) 712-3689	
7 Transporter 2 Company Name		8 US EPA ID Number		E. State Tran. ID		F. Tran. Phone ()	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				10 US EPA ID Number CT D 0 0 9 7 1 7 6 0 4		G. State Facility's ID	
				H. Facility's Phone: 203-621-8283			
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12 Containers No	13 Total Quantity	14 Unit Wt./Vol	15 Waste No.
a. RG Waste Flammable Solid, n.o.s. (EPA Ignitability) Flammable Solid UN 1325				014	DM 05950	P	D 0 0 1
b. RG Waste Asphalt, Cut Back (EPA Ignitability) Flammable Liquid NA 1999				009	DM 03825	P	D 0 0 1
c.							
d.							
16 J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
a. asphalt cutback (tar)				a.			
b. "base" asphalt cut back				b.			
15 Special Handling Instructions and Additional Information 11a) PIN 015960-ID b) PIN 015961-ID							
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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, in the best economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me with regard to the waste 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 the waste and to select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name RAY GILL		Signature <i>Ray Gill</i>		Month Day Year			
17 Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name Kevin E. Dwan Jr.		Signature <i>Kevin E. Dwan Jr.</i>		Month Day Year 05 27 88			
18 Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		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 <i>Allen B. Peterson</i>		Month Day Year 05 27 88			

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0167855

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. VTD980667679000000	Manifest of 0000000000	2 Page 1 of 1	Information in the spaces above is not required by Federal law, but may be required by State law.		
3 Generator's Name and Mailing Address State of Vermont-Agency of Transportation 133 State St. Montpelier, VT 05602				A. State Manifest Document Number CTC 0167858			
4 Generator's Phone (802) 828-3669				B. State Gen. ID State Garage			
5 Transporter 1 Company Name C.M. Laboratories, Inc.		6 US EPA ID Number ME D 0 8 3 1 7 9 9 4 5		C. State Trans. ID 0167858		D. Tran. Phone 802-828-3669	
7 Transporter 2 Company Name		8 US EPA ID Number		E. State Tran. ID		F. Tran. Phone	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10 US EPA ID Number CTD 0 9 9 7 1 7 6 0 4		G. State Facility's ID		H. Facility's Phone 203-621-8383	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers	13 Total Quantity	14 Unit Wt./Vol	1 Waste No
a EO Waste Combustible Liquid (EPA Ignitability) Combustible Liquid RA 1993				002 DN	00/10	G	D001
b EO Waste EO Waste Flammable Liquid, n.o.s. (F005) Flammable Liquid UN 1993				001 DM	00055	G	F005
c EO Waste Flammable Liquid, n.o.s. (F005) Flammable Liquid UN 1993				004 DM	00220	G	F005
15 Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
a. coal tar creosote epoxy bridge paint				a.			
b. methyl ethyl ketone 50-600 pigments, fillers 20-600				b.			
15 Special Handling Instructions and Additional Information 1) UN 015959-PD 2) UN 015967-PD 3) UN 015957-PD							
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.							
I, as a large quantity generator, certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree, in my opinion, as practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which poses the least 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 selected the best waste management method that is available to me and that I can afford.							
Printed/Typed Name DAVID T. BLACKMORE				Signature <i>David T. Blackmore</i>		Month Day Year 05 26 88	
7 Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name Kevin E. Durkin SR.				Signature <i>Kevin E. Durkin SR.</i>		Month Day Year 05 26 88	
8 Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name				Signature		Month Day Year	
9 Discrepancy Indication Space							
10 Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 13							
Printed/Typed Name				Signature		Month Day Year	

FOR SHIPMENTS WITHIN CONNECTICUT, CONTACT TUEP OR AND CHEMICAL SPILLS AT (203) 566-3338

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0167858

STATE OF CONNECTICUT DEPARTMENT OF ENVIRONMENTAL PROTECTION Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST. 1 Generator's US EPA ID No: VT D 9 8 0 7 3 0 8 0 8 0 0 0 0 1. Manifest Document No. 2 Page 1 of 1. Information in the shaded areas is not required by Federal law but may be required by State law. 3 Generator's Name and Mailing Address: State of Vermont - Agency of Transportation 133 State St. Montpelier, VT 05602. 4 Generator's Phone: 828-2564. 5 Transporter 1 Company Name: C.M. Laboratories, Inc. 6 US EPA ID Number: ME D 0 3 3 1 7 9 9 4 5. 7 Transporter 2 Company Name. 8 US EPA ID Number. 9 Designated Facility Name and Site Address: Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489. 10 US EPA ID Number: CT D 0 0 9 7 1 7 6 0 4. 11 US DOT Description: a. 20 Waste Flammable Solid, n.o.s. (2001) Flammable Solid UN 1325. 12 Containers No. Type. 13 Total Quantity. 14 Unit Wt./Vol. 15 Waste No. b. Non Hazardous Liquid, n.o.s. DOT Hazard Class: N/A. 16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations. 17 Transporter 1 Acknowledgement of Receipt of Materials. 18 Transporter 2 Acknowledgement of Receipt of Materials. 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.

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 568-3338. IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1-800-424-8802.

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125386

GENERATOR TRANSPORTER FACILITY

STATE OF CONNECTICUT DEPARTMENT OF ENVIRONMENTAL PROTECTION Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106



Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Main manifest form with sections for Generator's Name, Facility Name, US DOT Description, Containers, and Certifications. Includes handwritten entries for 'State of Vermont Agency of Transportation' and 'C.M. Laboratories, Inc.'.

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125370

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. VT P 0000002729	Manifest Document No. 1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
3. Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St. Montpelier, VT 05602				A. State Manifest Document Number CT C 0125368		
4. Generator's Phone (302) 328-2087				B. State Gen. ID P.R. Hammer Site		
5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number VT 0000000045		C. State Tran. ID DL1275		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Tran. Phone (302) 772-3000		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				E. State Tran. ID		
10. US EPA ID Number CT D 0000000014				F. Tran. Phone ()		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers		13. Total Quantity
				No.	Type	Unit Wt/Vol
a. Acetone				052	2400	N/A
b. Acetone				004	2400	N/A
c. Acetone				004	2400	N/A
d. Acetone				004	2400	N/A
Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. PIN 15212GD				a. U1		
b. PIN 15097GD				b. U1		
c. PIN 15212GD				c. U1		
d. PIN 15212GD				d. U1		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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				Signature		Month Day Year
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name		Signature
18. Transporter 2 Acknowledgement of Receipt of Materials				Printed/Typed Name		Signature
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		Month Day Year

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125368

DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building
 Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.) FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No V.T.P.0.0.0.0.0.1.3.7.1 0.0.0.0.0	Manifest Document No 0.0.0.0.0	2 Page of 1	Information on the shaded areas is not required by Federal law but may be required by the law of the State.
3 Generator's Name and Mailing Address State of Vermont Agency of Transportation 123 State St., Montpelier, VT 05602			A State Manifest Document Number CT C 0208605		
4 Generator's Phone 802 323-2087		6. US EPA ID Number M.E.D.0.3.2.1.7.9.0.4.5		B State Gen ID: (Site Address) Garrison, Middlebury, VT 05662	
5 Transporter 1 Company Name C.M. Laboratories, Inc.		8 US EPA ID Number		C. State Trans ID ME E38171	
7 Transporter 2 Company Name		10 US EPA ID Number		D. Tran. Phone (207) 772-3600	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489			E. State Tran ID		
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12 Containers No Type		13 Total Quantity 14 Unit Wt/Vol 15 Waste No
a. Hazardous Waste Liquid, n.o.s. ORM-E NA 9189			003 D.M. 00890		NONE
b. Hazardous Waste Solid, n.o.s. ORM-E NA 9189			001 D.M. 00300		NONE
c. Hazardous Waste Solid, n.o.s. ORM-E NA 9189			001 D.M. 00025		NONE
d. RC Waste Paint (F003, F005) Flammable Liquid UN1263			001 D.M. 00370		F003 F005
Additional Descriptions for Materials Listed Above water 10%, asphalt cut back 90%			K Handling Codes for Wastes Listed Above		
c. asphalt cutback 100%			a.		
d. paint pigments, dirt asphalt			b.		
e. xylene, toluene, MEX oils			c.		
f. pigments, fillers			d.		
15 Special Handling Instructions and Additional Information a) PIN 016561-ID (Tarrif #1) b) PIN 016562-ID (Paint #1) c) XXXXXXXXXXXX PIN 016563-ID (Tarrif #2) d) PIN 016564-ID (Paint #2A)					
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 properly packaged, marked and labeled, and are in all respects in proper condition for transport in accordance with applicable international and national government regulations, and all applicable State laws and regulations. I am a large quantity generator, and I have selected the practicable method of treatment, storage, and disposal which is the most protective of human health and the environment, and which is economically practicable and that I have selected the practicable method of treatment, storage, and disposal which is the most protective of human health and the environment. OR, I am a small quantity generator, I have made a good faith effort to determine the best available treatment, storage, and disposal method that is applicable to me and that I have selected that method.					
Printed Typed Name Richard R. [Signature]			Signature [Signature]		
17 Transporter 1 Agency/Department/Institution Printed Typed Name [Signature]			Signature [Signature]		
18 Transporter 2 Agency/Department/Institution Printed Typed Name			Signature		
19 Discrepancy Indication (Space)					
20 I, the undersigned, hereby certify that I am the receipt of hazardous materials covered by this manifest, except as noted on this manifest.					
Printed Typed Name			Signature		

FOR SPILLS WITHIN CONNECTICUT CONTACT CTEP. FOR SPILLS OUTSIDE CONNECTICUT CONTACT CTEP. EITHER BY PHONE OR BY MAIL. CTEP IS A DIVISION OF THE DEPARTMENT OF ENVIRONMENTAL PROTECTION.

COPY 5

CT C 0208605

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION**
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106

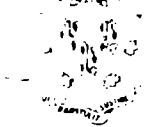


Please print or type. (Form designed for use on elite (12-pitch) typewriter)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No 02D000000116600001	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
3. Generator's Name and Mailing Address Weatherend Estate Furniture 3 Gordon Drive Rockland, ME 048				A. State Manifest Document Number CT-C-0125383		
4. Generator's Phone (207) 596-6483				B. State Govt. ID No. (if any)		
5. Transporter 1 Company Name C.N. Laboratories, Inc.		6. US EPA ID Number 02D083179945		C. State Govt. ID No. (if any)		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Tran. Phone (207) 725-3405		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England Inc. Lazy Lane, Southington, CT 06489				E. State Govt. ID No. (if any)		
10. US EPA ID Number 02TD0009717604				F. Tran. Phone (207) 725-3405		
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. RQ Waste Flammable Solid, n.o.s. (P095) Flammable Solid UN1325				No. 001	Type D	55 G
						Waste No. P095
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. paint solids				a. SOL		
b.				b.		
15. Special Handling Instructions and Additional Information PIN 015418-1D						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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				Signature		Month Day Year
						03-12-85
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name				Signature		Month Day Year
						03-12-85
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name				Signature		Month Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19						
Printed/Typed Name				Signature		Month Day Year

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125383

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MBD0000011460000	Manifest No. 00000000	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
3. Generator's Name and Mailing Address Weatherford Estate Furniture 3 Gordon Drive Rockland, ME 04811				A. State Manifest Document Number CT C 0167860		
4. Generator's Phone (207) 596-6483		6. US EPA ID Number MBD083179945		B. State Facility's ID CTD09717604		
5. Transporter 1 Company Name C.M. Laboratories, Inc.		8. US EPA ID Number		C. State Facility's ID CTD09717604		
7. Transporter 2 Company Name		10. US EPA ID Number		D. State Facility's ID CTD09717604		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				E. State Facility's ID CTD09717604		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
a. RQ Waste Flammable Solid, n.o.s. (F005) Flammable Solid UN 1325				001	DM 00055	G F005
15. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. polyurethane paint with toluene and methyl ethyl ketone				a. 2		
16. Special Handling Instructions and Additional Information Profile 915418-D				b. 1		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.						
I am a large quantity generator, 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 JEFFERY BARROWS		Signature <i>Jeffery Barrows</i>		Month Day Year 06/10/88		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Kevin E. Dumas Jr		Signature <i>Kevin E. Dumas Jr</i>		Month Day Year 06/10/88		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		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		Month Day Year		

FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338
FOR SPILLS OUTSIDE CONNECTICUT CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1-800-424-8802
IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1-800-424-8802

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0167860

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building
 Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No V.T.D.0.6.4.4.3.6.0.7.4.0.0.0.0.1	Manifest Document No	2 Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law.	
Generator's Name and Mailing Address E H V Weidmann Industries Inc. P.O. Box 278 St. Johnsbury, VT 05819				A. State Manifest Document Number CT C 0208633		
4 Generator's Phone (802) 748-8106		6 US EPA ID Number M.E.D.0.3.3.1.7.9.9.4.5		C. State Tran. ID: ME E38171		
5 Transporter 1 Company Name C.M. Laboratories, Inc.		8 US EPA ID Number		D. Tran. Phone (207) 772-3659		
7 Transporter 2 Company Name		10 US EPA ID Number		E. State Tran. ID		
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10 US EPA ID Number CT D 0 0 9 7 2 7 6 0 4		G. State Facility's ID		
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12 Containers		13 Total Quantity	14 Unit Wt./Vol	15 Waste No.
a RC Waste Flammable Solid, n.o.s. (F003) Flammable Solid UN 1325		01/1 PM		0429.8	P	F003
b RC Waste Petroleum Oil, n.o.s. (EPA Ignitability) Combustible Liquid NA 1270		009 PM		0385.0	P	D001 CR02
Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
a acetone stillbottoms/ polyester resin		a.				
b.		b.				
15 Special handling instructions and Additional information 11a) PIN 016193-ID b) PIN 017434-FD						
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are truly 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, in accordance with applicable international and national government regulations, and all applicable State laws and 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 and that I have selected the most economically practicable and that I have selected the practicable method of treatment, storage, and disposal current at the time of 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 identify the most available and selected the best waste management method that is available to me and that I am using.						
Printed/Typed Name DONALD COWLES		Signature <i>Donald R Cowles</i>		Month Day Year 11/09/88		
17 Transporter 1 Acknowledgement - Receipt of Materials		Signature <i>Kevin F Dineen Jr</i>		Month Day Year 11/09/88		
18 Transporter 2 Acknowledgement - Receipt of Materials		Signature		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		Signature		Month Day Year		

COPY 5

CT C 0208633

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No VT D 0 6 4 4 3 6 0 7 4	Manifest No. 00000001	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
3. Generator's Name and Mailing Address B H V Waldman Industries Inc. P.O. Box 278 St. Johnsbury, VT 05819				A. State Manifest Document Number CT C 0167844		
4. Generator's Phone (802) 748-8166		6. US EPA ID Number VT D 0 8 3 1 7 9 9 4 5		C. State Facility's ID CT D 0 9 7 1 7 6 0 4		
5. Transporter 1 Company Name C.M. Laboratories, Inc.		8. US EPA ID Number		D. Tran. Phone 802-772-3669		
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Facility's ID		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Gary Lane, Southington, CT 06489		10. US EPA ID Number CT D 0 9 7 1 7 6 0 4		F. Tran. Phone 800-421-8383		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No.	13. Total Quantity	14. Unit Wt./Vol.
a. RC Waste Flammable Solid, n.s.s. (P003) Flammable Solid UN 1325				016	DW	5500 P
b.						
c.						
Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. acetone still bottoms with polybuter seals				a. SA		
b.				b.		
c.				c.		
d.				d.		
15. Special Handling Instructions and Additional Information						
File Profile (VIN) 016193-ID						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.						
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 technically 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 used the best waste management method that is available to me and that I can afford.						
Printed/Typed Name DONALD E. COWLES		Signature <i>[Signature]</i>		Month Day Year 07/13/88		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>[Signature]</i>		Month Day Year 07/13/88		
Printed/Typed Name Kevin E. Dwanse		Signature <i>[Signature]</i>		Month Day Year 07/13/88		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month Day Year		
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Consignee Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19						
Printed/Typed Name		Signature		Month Day Year		

EPA Form 6700-22 (Rev. 9-86) Form Approved OMB No. 2050-0039. Expires 9-30-88. Previous edition is obsolete.

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0167844



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building
 Hartford, CT 06106

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

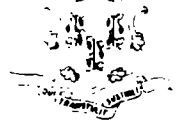
FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No V.T.D.0.6.4.4.2.6.0.7.4	Manifest Document No 0.6.0.0.1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
Generator's Name and Mailing Address E H V Weidmann Industries, Inc. P.O. Box 278 St. Johnsbury, VT 05819			A. State Manifest Document Number CT 0208636		
4 Generator's Phone 302 748-8106	5 Transporter 1 Company Name C.M. Laboratories, Inc.	6 US EPA ID Number M.E.D.0.8.3.1.7.9.9.4.5	C. State Transfer Agency DE 538171		
7 Transporter 2 Company Name			D. Transfer Agency		
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489			E. State Facility ID CT 0208636		
10 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 20 Waste Petroleum Oil, n.o.s. (EPA Ignitability) Combustible Liquid NA 1270			12. Containers No. Type 02 0 D M	13 Total Quantity 0.1100	14 Unit Wt/Vol G
Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
15 Special Handling Instructions and Additional Information Profile (11a) PIN 117404-ED			This material originally was shipped to C.M. Laboratories on Manifest # VTC018590 of 7/13/88. C.M. Labs is remanifesting to EPS for disposal. This is not a hazardous waste.		
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest are truly and accurately described above by proper shipping name and are properly packaged, marked, labeled, and are in proper condition for transport by highway according to applicable international and national government regulations and applicable State laws and regulations.					
17 Donald R. Cowles Printed/Typed Name: Donald R. Cowles Signature: <i>Donald R. Cowles</i> Date: 11/16/88					
18 Kevin E. Duran Sr. Printed/Typed Name: Kevin E. Duran Sr. Signature: <i>Kevin E. Duran Sr.</i> Date: 11/16/88					
19 Discrepancy, if any, in class					
20 Facility Owner or Operator Certification: I certify that hazardous materials covered by this manifest except as noted in item 19					
Printed/Typed Name: _____ Signature: _____ Date: _____					

FOR SPILLS WITHIN CONNECTICUT CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338

COPY 5
CT C 0208636

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**



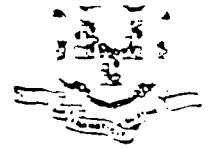
Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. P D D 0 5 4 1 6 0 8 1 7 3 0 0 0 0 1	Manifest Document No.	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
3 Generator's Name and Mailing Address Spencer Press Inc. Spencer Drive Wells, ME 04090			A. State Manifest Document Number CT C 0125362		
4 Generator's Phone (207) 546-4926			B. State Gen. ID		
5 Transporter 1 Company Name S.M. Laboratories, Inc.		6 US EPA ID Number M E D 0 1 9 2 1 7 9 2 1 0		C. State Trans. ID No. ME 251639	
7 Transporter 2 Company Name		8 US EPA ID Number		D. Tran. Phone (207) 772-3689	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England Inc. Lazy Lane, Southington, CT 06489		10 US EPA ID Number P D D 0 0 0 7 7 6 0 0 1		E. State Tran. ID	
				F. Tran. Phone	
				G. State Facility's ID C 01-10	
				H. Facility's Phone 860-271-1001	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12 Containers No.	13 Total Quantity	14 Unit Wt/Vol
a. RC Waste Combustible Liquid, n.o.s. (EPA Ignitability) Combustible Liquid NA1993			016	00880	G
b. RC Waste Combustible Liquid, n.o.s. (EPA Ignitability) Combustible Liquid NA1993					
c.					
d.					
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a. standard solvent 40-50%			a.		
b. aromatic hydrocarbon distillates 40-50%			b.		
c.			c.		
d.			d.		
15 Special Handling Instructions and Additional Information PTN 014568-90 Item 11a					
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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 LARRY TRALE		Signature		Month Day Year 11/12/587	
17 Transporter 1 Acknowledgement of Receipt of Materials					
Printed/Typed Name Kevin E. Dwyer Jr		Signature		Month Day Year 11/12/587	
18 Transporter 2 Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		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		Month Day Year	

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3338
IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER U.S. COAST GUARD 1-800-424-8802

COPY 5: TRANSPORTER 1 - Retained by Transporter C I C U L 25362

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State Office Building, Hartford, CT 06106



PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. M.E.D.0.5.4.6.0.8.1.7.9		Manifest Document No. 0.0.0.0.1		2. Page 1 of 1		Information in the shaded areas is required by Federal law, but may be required by State law.					
GENERATOR'S Name and Mailing Address Spencer Press Inc. Spencer Drive Walls, ME 04090						State Manifest Document Number CT B 0082727							
4. GENERATOR'S Phone: 207 646-9926						5. State Gen. ID							
5. TRANSPORTER 1 Company Name C.M. Laboratories, Inc.			6. US EPA ID Number M.E.D.0.8.3.1.7.9.9.4			7. State Tran. ID ME 261630		8. Tran. Phone: 207 772-3589					
7. TRANSPORTER 2 Company Name			8. US EPA ID Number			9. State Tran. ID		10. Tran. Phone					
9. DESIGNATED FACILITY Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489						10. US EPA ID Number CTD0.0.9.7.1.7.6.0.4							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) RQ Waste Combustible Liquid N.O.S. (EPA Ignitability) Combustible Liquid RA1993						12. Containers No. Type		13. Total Quantity		14. Unit (Wt./Vol)		15. Waste No.	
						10370402035		53		0001			
16. Additional Descriptions of Materials Shipped (See instructions on back of form) stockard solvent 40-508 2-Ethoxyethanol 5-108 aromatic hydrocarbon distillates 508						17. Hazardous Waste No. (See instructions on back of form)							
18. SPECIAL HANDLING (For use by State or Federal Agency) HAZ PIN 014568-AD													
19. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this shipping manifest are true and correct, and that the materials described herein are properly classified, packaged, marked and labeled, and are in full compliance with all applicable Federal, international, and national government regulations, and all applicable State laws and regulations. Unless I am a small quantity generator, you have been exempted by statute or regulation from the requirements of RCRA Section 3000(b)(1) and (2) and you have implemented a program in place to reduce the amount of hazardous waste generated, and you have selected the method of treatment, storage, or disposal which minimizes the present and future threat to human health and the environment.													
Printed/Typed Name John McCarty					Signature <i>John McCarty</i>								
20. TRANSPORTER 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name John E. Quinn Jr					Signature <i>John E. Quinn Jr</i>								
21. TRANSPORTER 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name					Signature								
22. RECEIPTS													
23. FACILITY OWNER OR OPERATOR													
Printed/Typed Name					Signature								

10-10-80 (REV. 10-10-80) DEPT. OF ENVIRONMENTAL PROTECTION, HARTFORD, CT 06106

10-10-80 (REV. 10-10-80) DEPT. OF ENVIRONMENTAL PROTECTION, HARTFORD, CT 06106

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State Office Building, Hartford, CT 06106



PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. V7000001627	Manifest Document No. 03081	2. Page 1 of 1	Information in the shaded areas required by Federal law but may be required by State law
3. GENERATOR'S Name and Mailing Address Vermont Tubbs Inc. P.O. Box 148 Forest Dale, VT 05745			State Manifest Document Number CT B 0082728		
4. GENERATOR'S Phone: 802 247-3414			State Gen ID		
5. TRANSPORTER 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME D 0 8 3 1 7 9 9 4 5		C. State Tran ID ME 261630	
7. TRANSPORTER 2 Company Name		8. US EPA ID Number		D. Tran Phone: 203 772-3689	
9. DESIGNATED FACILITY Name and Site Address Solvents Recovery Service of New England Inc. Lazy Lane Southington, CT 06489		10. US EPA ID Number CTD 0 0 9 7 1 7 6 0 4		E. State Tran ID	
				F. Tran Phone:	
				G. State Facility	
				H. Facility Phone: 203 621-8383	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt vol Waste No.
RC Waste Flammable Liquid n.o.s. (F005) Flammable Liquid UN1993			No. 101 Type A	100880	F005
15. Additional Descriptions for Materials Listed Above					
16. SPECIAL HANDLING Instructions and Additional Information PIH 014531-FD					
17. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this container are properly labeled, packaged, marked and coded and are in all respects in compliance with applicable international and national government regulations, and all applicable State laws and regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the requirements of Section 2002B of the RCRA, I also hereby declare that I have a program in place to reduce the volume of waste generated, that I have selected the method of treatment, storage or disposal which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name Tom Colby			Signature <i>Tom Colby</i>		
TRANSPORTER 1 Acknowledgement of Receipt of Materials Printed/Typed Name Kevin E. Duxan Sr.			Signature <i>Kevin E. Duxan Sr.</i>		
TRANSPORTER 2 Acknowledgement of Receipt of Materials Printed/Typed Name			Signature		
18. FACILITY OWNER OR OPERATOR Printed/Typed Name Signature					

STATE OF CONNECTICUT DEPARTMENT OF ENVIRONMENTAL PROTECTION HAZARDOUS WASTE MANIFEST SECTION

0717000 010010



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME P 0 0 0 0 0 0 0 6 9 8 7		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.			
3. Generator's Name and Mailing Address Pasternak & Pouchy Enterprise Street East Boothbay, ME 04544						A. State Manifest Document Number ME A 047282					
4. Generator's Phone (207) 633-6517						B. State Generator's ID SAME					
5. Transporter 1 Company Name C.M. Laboratories, Inc.				6. US EPA ID Number ME D 0 0 0 9 4 6 7 6 1 2		C. State Transporter's ID ME F 38172					
7. Transporter 2 Company Name						D. Transporter's Phone 207-883-8395					
8. US EPA ID Number						E. State Transporter's ID					
9. Designated Facility Name and Site Address General Recovery Service of New England, Inc. 275 Lane, Southington, CT 06489						G. State Facility's ID P.O. Box 362, Southington, CT					
10. US EPA ID Number C 0 0 0 0 1 7 1 7 6 8 4						H. Facility's Phone 860-521-8383					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)											
a. Flammable Liquid N.O.S. (UN 1993) (D001)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	15. Waste No.
Flammable Liquid						003 DM 00165C					D 0 0 1
b.											F 0 0 3
c.											
d.											
16. Additional Descriptions for Materials Listed Above Methyl Methyl Ketone, xylene a. Paint Solvent						K. Handling Codes for Wastes Listed Above					
b.						a.					
c.						b.					
d.						c.					
d.						d.					
15. Special Handling Instructions and Additional Information 111 Me. PIN 420096-PD											
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 GEORGE W. LYON				Signature <i>George W. Lyon</i>				Month Day Year 1 20 90			
17. Transporter 1 Acknowledgement or Receipt of Materials											
Printed/Typed Name Kevin E. DuMont				Signature <i>Kevin E. DuMont</i>				Month Day Year 1 20 90			
18. Transporter 2 Acknowledgement or Receipt of Materials											
Printed/Typed Name				Signature				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 Allan B. PETERSON				Signature <i>Allan B. Peterson</i>				Month Day Year 1 20 90			

In the event of a spill, contact the National Response Center, U.S. Coast Guard at 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-2-0777.

GENERATOR

TRANSPORTER

FACILITY

TRANSPORTER COPY

ME A 11/1/90



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MEP00000610700001	Manifest Document No. of 1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State Law.		
3. Generator's Name and Mailing Address Washburn & Doughty Enterprise Street West Boothbay, Maine 04544				A. State Manifest Document Number ME A 029991			
4. Generator's Phone () 207 633 6517		6. US EPA ID Number		B. State Generator's ID P.O. Box 296 East Boothbay			
5. Transporter 1 Company Name C.M. Laboratories, Inc.		8. US EPA ID Number		C. State Transporter ID ME P50172			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 207-883-6395			
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane Southington, CT. 06489				10. US EPA ID Number ETD009717604		G. State Facility ID P.O. Box 295 Southington, CT.	
				H. Facility Phone 203-621-8383			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
a. Flammable Liquid n.o.s. (F 003)			005	00275		F 003	
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
a. Print Solvent				a.			
c.				c.			
5. Special Handling Instructions and Additional Information 10086, ID							
6. 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. 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 be 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 Carl W. Peterson		Signature <i>Carl W. Peterson</i>		Month Day Year 04/7/90			
Printed/Typed Name Kevin J. Lemak		Signature <i>Kevin J. Lemak</i>		Month Day Year 04/7/90			
Printed/Typed Name		Signature		Month Day Year			
3. Discrepancy and date on space							
10. Date of receipt of receipt of hazardous materials covered by this manifest (except as noted)							
Printed/Typed Name Allen B. Peterson		Signature <i>Allen B. Peterson</i>		Month Day Year 04/9/90			

In the event of a spill, contact the National Response Center, U.S. Coast Guard 202-424-8802. For spill in Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-32-0777.

TRANSPORTER COPY

ME A 029991



1077
STATE OF MAINE
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333

Please Print or Type (Form designed for use on site) (2-Digit type permit) Form Approved OMB No. 2050-0018 Expires 6/30/93

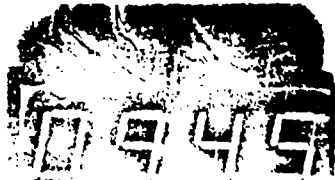
UNIFORM HAZARDOUS WASTE MANIFEST		Manifest Document No.	Date of Manifest			
Generator's Name and Mailing Address Weatherland Estate Furniture 2 Gordon Drive Rockland, Maine 04840		ME P 000 000 000	ME A 030019			
Generator's Phone 207 544 4482		US EPA ID No.	State Generator's ID ME P 3812			
Transporter's Company Name Environmental Services, Inc.		US EPA ID No.	Transporter's Phone 207 882 4301			
Transporter's Phone 207 882 4301		US EPA ID No.		State Transporter's ID		
Destination Facility Name and Site Address Solvents Recovery Service of New England, Inc. Leit Lane Southampton, CT 06486		US EPA ID No.		State Facility's ID P.C. Box 362 Southampton, CT		
Facility's Phone 203 621 8383						
US DOT Description (including Proper Shipping Name, Hazard Class and ID Number)		Container No.	Type	Total Quantity	HAZARDOUS	WASTE No.
RC Waste Flammable Solid n.c.s./ Flammable Solid		003	DRUM	01.175	P	P 005
Additional Descriptions for Materials Listed Above a. Paint Solids # 62		b.		Handling Codes for Wastes Listed Above S01		
Special Handling Instructions and Additional Information 11 a. FED # 015418 ED						
GENERATOR'S CERTIFICATION: I hereby declare that the contents of this shipment are as accurately described above and are properly packaged, marked, and labeled and are in all respects in proper condition for transport by highway, according to applicable international and national government regulations.						
Printed Name Mike D. Ke		Signature <i>Mike D. Ke</i>			Month Day Year 06 27 90	
Printed Name Kevin E. Duran Sr.		Signature <i>Kevin E. Duran Sr.</i>			Month Day Year 06 27 90	
Printed Name		Signature			Month Day Year	
Permit No.		25 00824				
Printed Name Allan B. Peterson		Signature <i>Allan B. Peterson</i>			Month Day Year 06 27 90	

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-6813. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-482-0777.

INW 5017

ALL A 030019

SRP013





DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type (Form designed for use on either 112 pitch typewriter)

Form Approved OMB No. 2050-0088 Expires 8-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. ME D 0 0 0 0 0 0 0 1 5		Manifest Document No. 2	Page 1 of 2	Information in the shaded areas is not required by Federal law but may be required by State Law	
Generator's Name and Mailing Address Weatherend Barre Furniture, 3 Gordon Drive Rockland, ME 04840				A. State Manifest Document Number MEA 047283		B. State Generator's ID SAME	
Generator's Phone: 207 596-6483				C. State Transporter's ID ME E 38172		D. Transporter's Phone 207-883-8395	
Transporter 1 Company Name C.M. Laboratories, Inc.				E. US EPA ID Number ME D 0 0 0 0 0 0 0 1 5		F. State Transporter's ID ME E 38172	
Transporter 2 Company Name				G. US EPA ID Number		H. State Transporter's ID	
Designated Facility Name and Site Address Solvents Recovery Services of New England, Inc. Lamy Lane, Southington, CT 06484				I. US EPA ID Number CT D 0 0 0 0 0 0 0 1 5		J. State Facility's ID P.O. Box 362, Southington, CT	
K. Facility Phone 203-621-8383							
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers		13. Total Quantity	
a. Flammable Solid (D001) (P005) (D035) UN 1325				No. Type		14. Unit (wt/vol)	
Paint Solids 90%, Toluene 5%, Methyl Ethyl Ketone 5%				002 DM 00775		Waste No. P 7005	
Additional Descriptions for Materials Listed Above				K. Hazard Codes for Wastes Listed Above			
a. Paint Solids #62				T50 Blending			
15. Special Handling Instructions and Additional Information							
11a. P30 O15A1B-11							
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, packaged, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.							
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, 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 Kevin E. Duran				Signature Kevin E. Duran		Month Day Year 12 04 90	
17. Transporter 1 Acknowledgment of Receipt of Materials							
Printed/Typed Name Kevin E. Duran				Signature Kevin E. Duran		Month Day Year 12 04 90	
18. Transporter 2 Acknowledgment of Receipt of Materials							
Printed/Typed Name				Signature		Month Day Year	
19. Discrepancy Indication Section							
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 16.							
Printed/Typed Name Allen B. Peterson				Signature Allen B. Peterson		Month Day Year 12 04 90	

11WF COPY

MEA 047283

For info on the M... P.M. contact the regular response center, U.S. Coast Guard 1-800-424-8017. For spill within Maine, contact DEP, OH and Hazardous Materials Control at 1-800-482-0777.

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.

BILLING CODE 8560 50C

COPY 4 - 11WF COPY

25 00818

SRP013



HAZARDOUS MATERIALS MANAGEMENT PROGRAM
 State Office Building
 Montpelier, Vermont 05650

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2000-0404 Expires 7-31-95

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. VT 09973	Manifest Document No. 73	2. Page of 1	Information in the shaded areas is not required by Federal law	
Generator's Name and Mailing Address Island Pond Division of Brian Allen, Inc. Rt. 105, Island Pond, Vt. 05846				A. State Manifest Document Number VT 0016407		
4. Generator's Phone (802) 723-326				B. State Generator's ID		
5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME D 031739		C. State Transporter's ID 000130		
7. Transporter 2 Company Name R. J. T. Waste Disposal, Inc.		8. US EPA ID Number R J D 75373		D. Transporter's Phone 207-772-3089		
9. Designated Facility Name and Site Address Solvents Recovery Services of New England, Inc. P.O. Box 362 Burlington, VT 05409				E. State Transporter's ID		
10. US EPA ID Number VT 09973				F. Transporter's Phone 203-628-0084		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers	13. Total	14. Unit
				No.	Quantity	Wt./Vol
a. Waste Flammable Solid, A.C.S. Flammable Solid, UN1225				1	1	1
b. Waste Flammable Solid, A.C.S. Flammable Solid, UN1225				1	1	1
c.						
d.						
Additional Descriptions for Materials Listed Above 1) Lacquer & Solvent 50 2) Lacquer & Solvent 50 Lacquer and Solvent 50 Solvent 50						
15. Special Handling Instructions and Additional Information 1) PIN 11895-GD 2) PIN 11895-GD						
GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packed, marked, and labeled, and the disposal method is properly identified in accordance with applicable international and national government regulations, and of applicable State, local and tribal laws.						
Unless I am a small quantity generator who has been exempted by statute or regulation from the above requirements, I have determined to be economically practicable and I have selected the method of treatment, storage, and disposal that minimizes the present and future threat to human health and the environment.						
Printed/Typed Name KEVIN E. DURAN JR.				Signature <i>Kevin E. Duran Jr.</i>		
17. Transporter 1 Acknowledgement of Receipt of Materials				Date 03.05.97		
Printed/Typed Name KEVIN E. DURAN JR.				Signature <i>Kevin E. Duran Jr.</i>		
18. Transporter 2 Acknowledgement of Receipt of Materials				Date		
Printed/Typed Name				Signature		
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 DALE A. BLISS				Signature <i>Dale A. Bliss</i>		
				Date 03.06.97		

Copy 5: Transporter 1

VT 0016407

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State Office Building, Hartford, CT 06106



PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NEP-04-9-2-8-8-1-6-0-0-0-1-6	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
3. GENERATOR'S Name and Mailing Address Burrhan Division of Kuba Allen, Inc. Canaan Road Burrhan, Maine 04922		6. US EPA ID Number ME 57-0-8-3-1-7-9-9-1-5		A. State Manifest Document Number CT B 0079290	
4. GENERATOR'S Phone: 203 657-3322		7. TRANSPORTER 1 Company Name C.N. Labs		B. State Gen ID None	
5. TRANSPORTER 1 Company Name C.N. Labs		8. US EPA ID Number ME 57-0-8-3-1-7-9-9-1-5		C. State Tran ID ME218631	
9. TRANSPORTER 2 Company Name		10. US EPA ID Number		D. Tran Phone: 203 778-3689	
11. DESIGNATED FACILITY Name and Site Address SRS of New England, Inc. P.O. Box 362, Lamy Lane Southington, CT 06489		12. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Waste Flammable Solid H.O.S. Flammable Solid, III 1325		E. State Tran ID	
				F. Tran Phone	
				G. State Facility ID	
				H. Facility Phone: 203 628-8084	
				I. Facility Name	
				J. Facility Address	
				K. Facility City/State/Zip	
				L. Facility Contact Name	
				M. Facility Contact Phone	
				N. Facility Contact Address	
				O. Facility Contact City/State/Zip	
				P. Facility Contact Name	
				Q. Facility Contact Phone	
				R. Facility Contact Address	
				S. Facility Contact City/State/Zip	
				T. Facility Contact Name	
				U. Facility Contact Phone	
				V. Facility Contact Address	
				W. Facility Contact City/State/Zip	
				X. Facility Contact Name	
				Y. Facility Contact Phone	
				Z. Facility Contact Address	
				AA. Facility Contact City/State/Zip	
				AB. Facility Contact Name	
				AC. Facility Contact Phone	
				AD. Facility Contact Address	
				AE. Facility Contact City/State/Zip	
				AF. Facility Contact Name	
				AG. Facility Contact Phone	
				AH. Facility Contact Address	
				AI. Facility Contact City/State/Zip	
				AJ. Facility Contact Name	
				AK. Facility Contact Phone	
				AL. Facility Contact Address	
				AM. Facility Contact City/State/Zip	
				AN. Facility Contact Name	
				AO. Facility Contact Phone	
				AP. Facility Contact Address	
				AQ. Facility Contact City/State/Zip	
				AR. Facility Contact Name	
				AS. Facility Contact Phone	
				AT. Facility Contact Address	
				AU. Facility Contact City/State/Zip	
				AV. Facility Contact Name	
				AW. Facility Contact Phone	
				AX. Facility Contact Address	
				AY. Facility Contact City/State/Zip	
				AZ. Facility Contact Name	
				BA. Facility Contact Phone	
				BB. Facility Contact Address	
				BC. Facility Contact City/State/Zip	
				BD. Facility Contact Name	
				BE. Facility Contact Phone	
				BF. Facility Contact Address	
				BG. Facility Contact City/State/Zip	
				BH. Facility Contact Name	
				BI. Facility Contact Phone	
				BJ. Facility Contact Address	
				BK. Facility Contact City/State/Zip	
				BL. Facility Contact Name	
				BM. Facility Contact Phone	
				BN. Facility Contact Address	
				BO. Facility Contact City/State/Zip	
				BP. Facility Contact Name	
				BQ. Facility Contact Phone	
				BR. Facility Contact Address	
				BS. Facility Contact City/State/Zip	
				BT. Facility Contact Name	
				BU. Facility Contact Phone	
				BV. Facility Contact Address	
				BW. Facility Contact City/State/Zip	
				BX. Facility Contact Name	
				BY. Facility Contact Phone	
				BZ. Facility Contact Address	
				CA. Facility Contact City/State/Zip	
				CB. Facility Contact Name	
				CC. Facility Contact Phone	
				CD. Facility Contact Address	
				CE. Facility Contact City/State/Zip	
				CF. Facility Contact Name	
				CG. Facility Contact Phone	
				CH. Facility Contact Address	
				CI. Facility Contact City/State/Zip	
				CJ. Facility Contact Name	
				CK. Facility Contact Phone	
				CL. Facility Contact Address	
				CM. Facility Contact City/State/Zip	
				CN. Facility Contact Name	
				CO. Facility Contact Phone	
				CP. Facility Contact Address	
				CQ. Facility Contact City/State/Zip	
				CR. Facility Contact Name	
				CS. Facility Contact Phone	
				CT. Facility Contact Address	
				CU. Facility Contact City/State/Zip	
				CV. Facility Contact Name	
				CW. Facility Contact Phone	
				CX. Facility Contact Address	
				CY. Facility Contact City/State/Zip	
				CZ. Facility Contact Name	
				DA. Facility Contact Phone	
				DB. Facility Contact Address	
				DC. Facility Contact City/State/Zip	
				DD. Facility Contact Name	
				DE. Facility Contact Phone	
				DF. Facility Contact Address	
				DG. Facility Contact City/State/Zip	
				DH. Facility Contact Name	
				DI. Facility Contact Phone	
				DJ. Facility Contact Address	
				DK. Facility Contact City/State/Zip	
				DL. Facility Contact Name	
				DM. Facility Contact Phone	
				DN. Facility Contact Address	
				DO. Facility Contact City/State/Zip	
				DP. Facility Contact Name	
				DQ. Facility Contact Phone	
				DR. Facility Contact Address	
				DS. Facility Contact City/State/Zip	
				DT. Facility Contact Name	
				DU. Facility Contact Phone	
				DV. Facility Contact Address	
				DW. Facility Contact City/State/Zip	
				DX. Facility Contact Name	
				DY. Facility Contact Phone	
				DZ. Facility Contact Address	
				EA. Facility Contact City/State/Zip	
				EB. Facility Contact Name	
				EC. Facility Contact Phone	
				ED. Facility Contact Address	
				EE. Facility Contact City/State/Zip	
				EF. Facility Contact Name	
				EG. Facility Contact Phone	
				EH. Facility Contact Address	
				EI. Facility Contact City/State/Zip	
				EJ. Facility Contact Name	
				EK. Facility Contact Phone	
				EL. Facility Contact Address	
				EM. Facility Contact City/State/Zip	
				EN. Facility Contact Name	
				EO. Facility Contact Phone	
				EP. Facility Contact Address	
				EQ. Facility Contact City/State/Zip	
				ER. Facility Contact Name	
				ES. Facility Contact Phone	
				ET. Facility Contact Address	
				EU. Facility Contact City/State/Zip	
				EV. Facility Contact Name	
				EW. Facility Contact Phone	
				EX. Facility Contact Address	
				EY. Facility Contact City/State/Zip	
				EZ. Facility Contact Name	
				FA. Facility Contact Phone	
				FB. Facility Contact Address	
				FC. Facility Contact City/State/Zip	
				FD. Facility Contact Name	
				FE. Facility Contact Phone	
				FF. Facility Contact Address	
				FG. Facility Contact City/State/Zip	
				FH. Facility Contact Name	
				FI. Facility Contact Phone	
				FJ. Facility Contact Address	
				FK. Facility Contact City/State/Zip	
				FL. Facility Contact Name	
				FM. Facility Contact Phone	
				FN. Facility Contact Address	
				FO. Facility Contact City/State/Zip	
				FP. Facility Contact Name	
				FQ. Facility Contact Phone	
				FR. Facility Contact Address	
				FS. Facility Contact City/State/Zip	
				FT. Facility Contact Name	
				FU. Facility Contact Phone	
				FV. Facility Contact Address	
				FW. Facility Contact City/State/Zip	
				FX. Facility Contact Name	
				FY. Facility Contact Phone	
				FZ. Facility Contact Address	
				GA. Facility Contact City/State/Zip	
				GB. Facility Contact Name	
				GC. Facility Contact Phone	
				GD. Facility Contact Address	
				GE. Facility Contact City/State/Zip	
				GF. Facility Contact Name	
				GG. Facility Contact Phone	
				GH. Facility Contact Address	
				GI. Facility Contact City/State/Zip	
				GJ. Facility Contact Name	
				GK. Facility Contact Phone	
				GL. Facility Contact Address	
				GM. Facility Contact City/State/Zip	
				GN. Facility Contact Name	
				GO. Facility Contact Phone	
				GP. Facility Contact Address	
				GQ. Facility Contact City/State/Zip	
				GR. Facility Contact Name	
				GS. Facility Contact Phone	
				GT. Facility Contact Address	
				GU. Facility Contact City/State/Zip	
				GV. Facility Contact Name	
				GW. Facility Contact Phone	
				GX. Facility Contact Address	
				GY. Facility Contact City/State/Zip	
				GZ. Facility Contact Name	
				HA. Facility Contact Phone	
				HB. Facility Contact Address	
				HC. Facility Contact City/State/Zip	
				HD. Facility Contact Name	
				HE. Facility Contact Phone	
				HF. Facility Contact Address	
				HG. Facility Contact City/State/Zip	
				HH. Facility Contact Name	
				HI. Facility Contact Phone	
				HJ. Facility Contact Address	
				HK. Facility Contact City/State/Zip	
				HL. Facility Contact Name	
				HM. Facility Contact Phone	
				HN. Facility Contact Address	
				HO. Facility Contact City/State/Zip	
				HP. Facility Contact Name	
				HQ. Facility Contact Phone	
				HR. Facility Contact Address	
				HS. Facility Contact City/State/Zip	
				HT. Facility Contact Name	
				HU. Facility Contact Phone	
				HV. Facility Contact Address	
				HW. Facility Contact City/State/Zip	
				HX. Facility Contact Name	
				HY. Facility Contact Phone	
				HZ. Facility Contact Address	
				IA. Facility Contact City/State/Zip	
				IB. Facility Contact Name	
				IC. Facility Contact Phone	
				ID. Facility Contact Address	
				IE. Facility Contact City/State/Zip	
				IF. Facility Contact Name	
				IG. Facility Contact Phone	
				IH. Facility Contact Address	
				II. Facility Contact City/State/Zip	
				IJ. Facility Contact Name	
				IK. Facility Contact Phone	
				IL. Facility Contact Address	
				IM. Facility Contact City/State/Zip	
				IN. Facility Contact Name	
				IO. Facility Contact Phone	
				IP. Facility Contact Address	
				IQ. Facility Contact City/State/Zip	
				IR. Facility Contact Name	
				IS. Facility Contact Phone	
				IT. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU. Facility Contact City/State/Zip	
				IV. Facility Contact Name	
				IU. Facility Contact Phone	
				IV. Facility Contact Address	
				IU.	



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

TRANSPORTER COPY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME 0001 0001 0649863	Manifest Document No. 1-1-1-1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State Law.	
3. Generator's Name and Mailing Address The Maine Bridge Co., Westbrook, Maine 04092				A. State Manifest Document Number ME A 638022		
4. Generator's Phone () 253-1470				B. State Generator's ID ME 0001 0001 0649863		
5. Transporter 1 Company Name D. F. LABORATORIES, INC.		6. US EPA ID Number ME 0001 0001 0649863		C. State Transporter's ID ME F38172		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone () 7-232-2095		
9. Designated Facility Name and Site Address NEW ENGLAND MANUFACTURING BRANCH OF New England, Inc. 207 Bates, Westbrook, ME 04092				E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility ID P. A. 0001 0001 0649863		
				H. Facility Name SOUTH BRIDGE, CO. 06499		
				I. Facility Phone () 203-621-8383		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. HAZARDOUS WASTE, UNCLAS. (7005)		008	DR	00440	16	7 # 0 5
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. Please see label				b.		
c.				d.		
5. Special Handling Instructions and Additional Information						
6. 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		Signature			Month Day Year	
					06/15/90	
17. Transporter 1 Acknowledgment of Receipt of Materials		Signature			Date	
Printed/Typed Name		Signature			Month Day Year	
Kevin J. Jankowski		Kevin J. Jankowski			06/15/90	
18. Transporter 2 Acknowledgment of Receipt of Materials		Signature			Date	
Printed/Typed Name		Signature			Month Day Year	
19. Discrepancy to National Usage						
20. Facility Owner or Operator: I hereby acknowledge receipt of hazardous materials covered by this manifest except as noted in item 13.						
Printed/Typed Name		Signature			Month Day Year	
Paul G. Gault		Paul G. Gault			06/15/90	

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-877-0777.

ME A 030022



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333

Please print or type. (Form designed for use on elite (12-pitch) typewriter).

Form Approved. OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME D 0 0 1 0 9 4 2 18 107250		Manifest Document No. of 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.	
3. Generator's Name and Mailing Address Scheco, Inc. 98 Bridge Street, Westbrook, ME 04092				A. State Manifest Document Number MEA 029948		B. State Generator ID SAME			
4. Generator's Phone 207 3548474		5. Transporter 1 Company Name D.M. Laboratories, Inc.		6. US EPA ID Number ME D 0 8 3 1 7 9 94 5		C. State Transporter ID ME F 38 1 72		D. Transporter's Phone 207-883-8395	
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 Solvents Recovery Service of New England, Inc. 200 Main St., Southington, CT 06489				10. US EPA ID Number CT D 0 0 9 7 1 7 60 4		G. State Facility ID P.O. Box 382, Southington, CT		H. Facility's Phone 203-621-8383	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.
a. Waste Flammable Solid n.e.s. Flammable Solid			UN 1729 F 0 0 5		006		00330 G		0005
b. Waste Flammable Liquid n.e.s. Flammable liquid			UN 1993 F005		006		00330 G		0005
c.									
d.									
16. Additional Descriptions for Materials Listed Above						17. Handling Codes for Wastes Listed Above			
a. Flammable Solids						T			
c. Quaternary Ammonium Salts						C			
18. Special Handling Instructions and Additional Information Hazardous Waste									
19. 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				Signature		Month Day Year			
Transporter 1 Acknowledgement of Receipt of Materials				Signature		Date			
Printed/Typed Name				Signature		Month Day Year			
Transporter 2 Acknowledgement of Receipt of Materials				Signature		Date			
Printed/Typed Name				Signature		Month Day Year			
20. Use additional indication space									
21. I hereby certify that the above description of receipt of hazardous materials covered by this manifest is correct as noted in item 11.									
Printed/Typed Name				Signature		Month Day Year			

In the event of a spill, contact the National Response Center, U.S. Coast Guard at 1-800-424-8802. For spill response in Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-2-0777.

TRANSPORTER COPY

MEA 029948



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter).

Form Approved: OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME P 0 4 9 5 0 6 5 8		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.					
3. Generator's Name and Mailing Address Bangor Auto Electric Company 33 State Street Bangor, Maine 04401						A. State Manifest Document Number MEA 030060		B. State Generator ID					
4. Generator's Phone 207 945 5621 X 3						C. State Transporter ID ME P 38176		D. Transporter's Phone 207 883 8395					
5. Transporter 1 Company Name C.M. Laboratories, Inc.						6. US EPA ID Number ME D 9 8 5 4 6 7 6 1 2		E. State Transporter's ID					
7. Transporter 2 Company Name						8. US EPA ID Number		F. Transporter's Phone					
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lacy Lane Southington, Ct. 06489						10. US EPA ID Number G 9 3 9 9 7 7 1 7 6 0		G. State Facility ID					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit WT/Vol		15. Waste No.	
a. Waste Flammable Liquid n.o.s. UN 1993 Flammable Liquid (D001)						003		00165		G		0001	
b.													
c.													
d.													
16. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a. Gas Oil and Diesel Fuel						b.							
c.						d.							
15. Special Handling Instructions and Additional Information													
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					Signature			Month Day Year					
								08/17/90					
17. Transporter 1 Acknowledgement of Receipt of Materials					Signature			Date					
Printed/Typed Name					Signature			Date					
KEVIN E. ...					Kevin E. ...			08/17/90					
18. Transporter 2 Acknowledgement of Receipt of Materials					Signature			Date					
Printed/Typed Name					Signature			Date					
19. Discrepancy Indication (Date)													
20. Facility Owner's Acknowledgement of Receipt of receipt of hazardous materials covered by this manifest except as noted in item 19.										Date			
Printed/Typed Name					Signature			Month Day Year					
Allen B. Peterson					Allen B. Peterson			08/17/90					

In the event of a spill, contact the National Response Center, U.S. Coast Guard at 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-2-0777.

TRANSPORTER COPY

MEA 030060



VERMONT AGENCY OF NATURAL RESOURCES
HAZARDOUS MATERIALS MANAGEMENT

103 South Main Street
Waterbury, Vermont 05676
802-244-8702

Print or type (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

In the event of an emergency, contact the National Response Center 1-800-424-8802 and if within Vermont, The Vermont Department of Public Safety 1-800-641-5005

Copy 5: Transporter 1

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. VT D 0 0 0 0 0 2 3 2 5		Manifest Document No. 1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address Buyer's Digest Industrial Park Georgia, Vermont 04554 802 893 4214					A. State Manifest Document Number VT 0029116			
4. Generator's Phone ()					B. Generator's State (if different) Georgia, VT.			
5. Transporter 1 Company Name C.M. Laboratories, Inc.				6. US EPA ID Number ME D 9 8 5 4 6 7 6 1 2 2	C. State Transporter's ID ME F 3 0 1 7 2			
7. Transporter 2 Company Name					D. Transporter's Phone 207 883 8395			
8. US EPA ID Number					E. State Transporter's ID			
9. Designated Facility Name and Site Address Solvents recovery Service of New England, Inc. Lazy Lane Southington, CT. 06489					F. Transporter's Phone			
10. US EPA ID Number CT D 0 0 9 7 1 7 6 0 4					G. State Facility's ID			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Non Hazardous Material None VT 14					12. Containers No. 001	13. Total Quantity 0.0385	14. Unit Wt./Vol. P	I. Waste No. VT 14
15. Additional Descriptions for Materials Listed Above Waste Ink					K. Handling Codes for Wastes Listed Above			
16. Special Handling Instructions and Additional Information UN 3. PIN # 120692 CD					L. Date			
15. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State law and 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 most appropriate 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 MARK J. RABY/MIWEKI				Signature <i>Mark J. Raby</i>		Month Day Year 09 06 90		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name KEVIN E. DURAN JR				Signature <i>Kevin E. Duran Jr</i>		Month Day Year 09 06 90		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature		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 Allen B. Peterson								
Signature <i>Allen B. Peterson</i>				Month Day Year 09 10 90				

VT 0029116

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. Manifest Document No. 2. Page of information in the shaded areas is not required by Federal law but may be required by State Law.

3. Generator's Name and Mailing Address
Henry S. Winkler Company
Store Road & Sunset Road Southwest Harbor, Maine

A. State Manifest Document Number
ME A 030065
B. State Generator's ID
None

4. Generator's Phone (207) 244-2531 (207) 246-670

C. State Transporter's ID
ME F3872
D. Transporter's Phone
207 883-8395

5. Transporter 1 Company Name
P.M. Enterprises, Inc.

E. State Transporter's ID

7. Transporter 2 Company Name
8. US EPA ID Number
9. Designated Facility Name and Site Address
Solvents Recovery Service of New England, Inc.
Lozy Lane Southington, CT 06489

F. Transporter's Phone
G. State Facility's ID
P.O. Box 362
Southington, CT 06489
H. Facility's Phone
203 621-8381

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers No. Type 13. Total Quantity 14. Unit (Wt/Vol) 15. Waste No.

a. ~~Waste Flammable Liquid n.o.s. Soluble Liquid~~ UN 1993 1993 001 00055 0001

b. ~~Waste Flammable Solid~~ UN 1325 1325 1111 1111 1111

c. ~~Waste Flammable Solid n.o.s. Flammable Solid~~ UN 1325 1325 1111 1111 1111

d. ~~Waste Flammable Liquid n.o.s. Flammable Liquid~~ UN 1993 1993 002 100100 0001

16. Additional Descriptions for Materials Listed Above
a. ~~Paint Thinner~~
b. ~~Black and White Ink~~
c. ~~Gas Oil Diesel~~
d. ~~Gas Oil Diesel~~

K. Handling Codes for Wastes Listed Above
a. ~~U11~~
b. ~~U12~~
c. ~~U13~~
d. ~~U14~~

15. Special Handling Instructions and Additional Information
ALL MATERIALS ARE TO BE HANDLED AS HAZARDOUS WASTE

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.

Printed/Typed Name: **MAITREY STANLEY** Signature: *[Signature]* Month Day Year: **08 30 90**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: **KEVIN E. DUGAN JR** Signature: *[Signature]* Month Day Year: **08 30 90**

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

19. Discrepancy (if any) of Quantities

20. Facility's Own Manifest Receipt of Receipt of Hazardous Waste

Printed/Typed Name: **Allen B. PETERSEN** Signature: *[Signature]* Month Day Year: **08 30 90**

In event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control 800-482-0777.

TRANSPORTER COPY

ME A U30065

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME 0101010101010101	Manifest Document No. 11111	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State Law.	
3. Generator's Name and Mailing Address Henry L. Hinckley Company Shore Road & Munset Road Southwest Harbor, Maine				A. State Manifest Document Number ME A 030036		
4. Generator's Phone (207) 244-5531 04679				B. State Generator's ID 3000		
5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME 0101010101010101		C. State Transporter's ID ME 49172		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 207 683-8395		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lutz Lane Southampton, Ct. 06488		10. US EPA ID Number		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID P.O. Box 362 Southampton, Ct. 06489		
				H. Facility's Phone 203 422-0000		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. RC Waste Flammable Liquid n.o.s. Flammable Liquid UN 1993				No. 002	Type 001	10
b. RC Waste Flammable Solid n.o.s. Flammable Solid UN 1825				No. 001	Type 000	400
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. Paint Thinner				a.		
b. Acetone Stib Bottoms				b.		
c.				c.		
d.				d.		
15. Special Handling Instructions and Additional Information 11 a. PIN # 001009 TO 001009						
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 airway 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 [Signature]		Signature [Signature]		Month Day Year 06 28 90		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name KEVIN E. JARVIS JR Signature [Signature] Month Day Year 06 28 90						
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature 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 3). Printed/Typed Name Allan B. PETERSON Signature Allan B. Peterson Month Day Year 06 28 90						

TRANSPORTER COPY

ME A 030036

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. If within Maine, contact DEP, Oil and Hazardous Materials Control 800-482-0777.

TRANSPORTER COPY

MEA 029990

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME 010111101101 40000		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.	
3. Generator's Name and Mailing Address Henry Hinckley Company Shore Road Southwest Harbor, Maine 04670				A. State Manifest Document Number ME A 029990		B. State Generator's ID			
4. Generator's Phone (207) 244 3531		5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME 010111101101 40000		C. State Transporter's ID ME F 38172		D. Transporter's Phone 207 883 9305	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone		G. State Facility's ID P.O. Box 302 Southington, CT	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Laz Lane Southington CT 06489				10. US EPA ID Number CT 010111101101 70000		H. Facility's Phone 203 627 9383			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. RC Waste Flammable Solid n.o.s. Flammable Solid UN 1325						No. 001	Type DRUM	00500	0003
b. RC Waste Flammable Solid n.o.s. Flammable Solid UN 1325						002	DRUM	10000	0003
c.									
d.									
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above			
a. Galled Acetone						a.			
b. Acetone Still Bottoms						b.			
c.						c.			
d.						d.			
15. Special Handling Instructions and Additional Information									
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 John A. Duran Jr.				Signature <i>John A. Duran Jr.</i>		Month Day Year 04/17/90			
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name Kevin E. Duran Jr.				Signature <i>Kevin E. Duran Jr.</i>		Month Day Year 04/17/90			
18. Transporter 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name				Signature		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									
Printed/Typed Name Allen B. Peterson				Signature <i>Allen B. Peterson</i>		Month Day Year 04/19/90			

In event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. If spill within Maine, contact DEP, Oil and Hazardous Materials Control 1-800-482-0777.



STATE OF MAINE
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No ME D 0 0 1 1 0 4 9 5 1 0	Manifest Document No.	2. Page 1 of 1	information in the shaded areas is not required by Federal law but may be required by State Law.	
3. Generator's Name and Mailing Address Henry W. Hinckley Company, Shore & Manset Road Southwest Harbor, ME 04679				A. State Manifest Document Number ME A 030096		
4. Generator's Phone (207) 244-5531				B. State Generator's ID SAME		
5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME D 1 9 1 8 5 4 6 7 6 1 1 2		C. State Transporter's ID ME F 3 8 1 7 2		
7. Transporter 2 Company Name				D. Transporter's Phone 207-693-8395		
9. Designated Facility Name and Site Address Solvent Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				E. State Transporter's ID		
10. US EPA ID Number CT D 1 9 1 4 9 1 4 7 6 1 0 1 4				F. Transporter's Phone		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
a. RC Waste Flammable Liquid UN 1993 Flammable Liquid D001, F003, F005, D035				004	00220	Waste No. 0035 D001 F005
b. RC Waste Flammable Solid n.o.s. UN 1205 Flammable Solid D001, F003				001	00055	D001 F003
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. Paint Thinner				a.		
b. Acetone Still Bottom				b.		
c.				c.		
d.				d.		
15. Special Handling Instructions and Additional Information 021076 DD						
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		Signature		Month Day Year		
				10 25 90		
17. Transporter 1 Acknowledgement of Receipt of Materials				Date		
Printed/Typed Name KEVIN E. WILSON JR		Signature <i>Kevin E. Wilson Jr</i>		Month Day Year 10 25 90		
18. Transporter 2 Acknowledgement of Receipt of Materials				Date		
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator Certification: I certify that the hazardous materials covered by this manifest are properly classified, packed, marked, and labeled in item 3.						
Printed/Typed Name Kenneth W. McLeod		Signature <i>Kenneth W. McLeod</i>		Month Day Year 10 26 90		

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-0777.

TRANSPORTER COPY

ME A 030096



STATE OF MAINE
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MEP0000006079	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State Law.		
3. Generator's Name and Mailing Address Dynneast Chemical Corporation 88 Scott Drive Westbrook, Maine 04072				A. State Manifest Document Number MEA 030076			
4. Generator's Phone (207) 773 9668				B. State Generator's ID 0300			
5. Transporter 1 Company Name C.M. Laboratories, Inc		6. US EPA ID Number 161616161616161616		C. State Transporter's ID ME F38172			
7. Transporter 2 Company Name XXXXXXXXXXXXXXXXXXXX		8. US EPA ID Number XXXXXXXXXXXX		D. Transporter's Phone 207 883 8395			
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazvi Lane Southington, CT 06489				10. US EPA ID Number 1910019171717171		E. State Facility's ID P.A. Box 362 Southington	
				H. Facility's Phone 203 621 8383			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
a. RC Waste Combustible Liquid n.o.s. UN 1993 Combustible Liquid (D001)			001	00015		D001	
b. RC Hazardous Waste Liquid n.o.s. NA 3189 ORM - E (P002)			001	00030		F002	
c.							
d.							
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
a. # 2 Solvent				a.			
b. # 7 Solvent				b.			
c.				c.			
d.				d.			
15. Special Handling Instructions and Additional Information							
11a. PIN # 021546 AD							
11b. PIN # 021843 AD							
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 Joseph J. Hita				Signature <i>Joseph J. Hita</i>		Month Day Year 11 04 1990	
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name KEVIN E. DURAN JR				Signature <i>Kevin E. Duran Jr</i>		Month Day Year 11 04 1990	
18. Transporter 2 Acknowledgement or Receipt of Materials							
Printed/Typed Name				Signature		Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest. Add as needed.							
Printed/Typed Name Kenneth W. McLeod				Signature <i>Kenneth W. McLeod</i>		Month Day Year 11 04 1990	

TRANSPORTER COPY

MEA 030076

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-424-8802.



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved. OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME 205165 207165		Manifest Document No. 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.			
3. Generator's Name and Mailing Address ME 205165 207165						A. State Manifest Document Number ME A 030047					
4. Generator's Phone 207 122-5101						B. State Generator ID ME 205165 207165					
5. Transporter 1 Company Name ME 205165 207165				6. US EPA ID Number ME 205165 207165		C. State Transporter ID ME 205165 207165					
7. Transporter 2 Company Name				8. US EPA ID Number		E. State Transporter's ID					
9. Designated Facility Name and Site Address ME 205165 207165						G. State Facility ID ME 205165 207165					
10. US EPA ID Number ME 205165 207165						H. Facility Phone 207 122-5101					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total		14. Unit	1. Waste No.
						No. Type		Quantity		Wt/Vol	
a. ME 205165 207165						012		2700660		G	C1204
b.											
c.											
d.											
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above					
a. ME 205165 207165						a.					
b.						b.					
c.						c.					
d.						d.					
15. Special Handling Instructions and Additional Information ME 205165 207165											
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. 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, 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 ME 205165 207165				Signature ME 205165 207165				Month Day Year ME 205165 207165			
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name ME 205165 207165		Signature ME 205165 207165		Month Day Year ME 205165 207165	
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space											
20. Receiver, Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19											
Printed/Typed Name ME 205165 207165				Signature ME 205165 207165				Month Day Year ME 205165 207165			

TRANSPORTER COPY

ME A 030047

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-877-0777.



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333

1/28/91



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039. Expires 9-30-91

GENERATOR COMPLETED COPY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MEP 00080 7136		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.					
3. Generator's Name and Mailing Address Scarborough Sanitary District 425 Black Point Road Scarborough, ME 04074 4. Generator's Phone (207) 883-4663						A. State Manifest Document Number ME A 047271							
5. Transporter 1 Company Name C.M. Laboratories, Inc.						6. US EPA ID Number MEP 0989467612		C. State Transporter's ID ME F38172					
7. Transporter 2 Company Name						8. US EPA ID Number		D. Transporter's Phone 207-883-8395					
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. P.O. Box 362, Lazy Lane, Southington, CT 06489						10. US EPA ID Number		E. State Transporter's ID					
								F. Transporter's Phone					
								G. State Facility's ID P.O. Box 362, Southington, CT					
								H. Facility's Phone 203-621-8283					
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
a. RQ Waste Flammable Liquid N.C.S. Methyl Ethyl Ketone, Butyl Acetate Toluol (E003/M005/D001/D035)						001		00050				F 0 0 3 E 0 0 5 D 0 0 1 D 0 3 5	
b. RQ Waste Combustible Liquid nos. Combustible Liquid NA1993 (D001) (methyl spirits 95%, oil 5%)						0017		00030		G		D001	
c.													
d.													
J. Additional Descriptions for Materials Listed Above Waste Transfer Station Toluol 20%, Butyl Acetate 30%						b. waste parts (fuel)		K. Handling Codes for Wastes Listed Above a. TSD c. -		TSD d. TSD			
I. Special Handling Instructions and Additional Information Maine DEP Emergency Phone 800-482-0777 Emergency Phone 207-883-4663 Scarborough Sanitary C.M. Labs 207-883-8395													
6. 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 ROBERT CLARK		Signature <i>Robert Clark</i>		Month Day Year 10 1 1991			
7. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name KEVIN E. DURHAM SR.		Signature <i>Kevin E. Durham</i>		Month Day Year 10 1 1991			
8. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name		Signature		Month Day Year			
9. 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 Allan B. PETERSON		Signature <i>Allan B. Peterson</i>		Month Day Year 10 1 1991		Date	

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-477-777.

ME A 047271



STATE OF MAINE
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

TRANSPORTER COPY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No ME X0200000001	Manifest Document No. 1-1-1-11	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State Law.	
3. Generator's Name and Mailing Address BRYAN'S Auto Body East Shore Rd NEW VINEYARD, ME 04956			A. State Manifest Document Number ME A 030024		B. State Generator ID STATE	
4. Generator's Phone (207) 652-2328		5. Transporter 1 Company Name C.M. LABORATORIES INC		6. US EPA ID Number ME D985467612	C. State Transporter ID ME F90172	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter Phone (207) 983-8395		E. State Transporter ID
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, INC LAZY LANE South Lisbon Pt 06489 P.T. DO 09717604			10. US EPA ID Number		G. State Facility ID ME 061362	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit	15. Waste No.
a. RD Waste PAINT related material, non (MEK, Toluene) Flammable Liquid NA 1263			201	DM	00026G	0001 0003 0005
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above Toluene 20% ALCOHOL 5% M.E.K. 20%			K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information 11a P.O. # 017534 - FD Emergency # (207) 983-8395 RT ERG # 26 C.M. LABS						
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 [Signature]			Signature [Signature]		Month Day Year 01/16/91	
17. Transporter 1 Acknowledgement of Receipt of Materials			Signature [Signature]		Month Day Year 01/16/91	
18. Transporter 2 Acknowledgement of Receipt of Materials			Signature		Month Day Year	
19. Discrepancy Indication Space						
20. Facility Owner or Operator Certification of Receipt of Hazardous Materials Covered by this Manifest (Not Excepted as Noted in Item 3)						
Printed/Typed Name Allen B. Peterson			Signature Allen B. Peterson		Month Day Year 01/17/91	

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-255-0777.

ME A 030024



COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF ENVIRONMENTAL QUALITY ENGINEERING
DIVISION OF SOLID AND HAZARDOUS WASTE
One Winter Street
Boston, Massachusetts 02108

In case of emergency or spill, immediately call the National Response Center (800) 424-8802.

Print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator US EPA ID No. MAD 001424787	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law
3. Generator's Name and Mailing Address INDEPENDENT CANAL INC 43 BIRCHWOOD STREET MILFORD MASS 01754			A. State Manifest Document Number MA C232315		B. State Gen. ID SOME2
4. Generator's Phone 508 562-9913		6. US EPA ID Number ME D 91854167612		C. State Trans. ID ME F38172	
5. Transporter 1 Company Name CM LABORATORIES INC		8. US EPA ID Number		D. Transporter's Phone (207) 883-8195	
7. Transporter 2 Company Name		9. US EPA ID Number		E. State Trans. ID	
9. Designated Facility Name and Site Address SOLVENTS RECOVERY SERVICE of NEW ENGLAND INC LALY LAKE SOUTHINGTON CT 06489			10. US EPA ID Number CT D 009717604		F. Transporter's Phone ()
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers		13. Total Quantity
a. RG WASTE FLAMMABLE SOLID, N.O.S. Flammable Solid UN 1325 - D001 1000 / D M 1010305 7 D001			No.	Type	14. Unit Wt/Vol
b.					15. Waste No.
c.					
d.					
15. Special Handling Instructions and Additional Information H.A. PIN # 021279-ID					
16. GENERATOR CERTIFICATION (hereby, I declare that the information furnished on this manifest and are classified, packed, marked, and labeled in accordance with applicable international and national government regulations)					
17. Transporter 1 Acknowledgement of Receipt of Materials Steve Viner			Signature		Date 07/26/90
18. Transporter 2 Acknowledgement of Receipt of Materials Kevin E. Duncan Sr			Signature		Date 07/26/90
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest (except as shown in item 17)			Signature		Date
Allen B. Peterson			Signature Allen B. Peterson		Date 07/26/90

MA C232315 COPY 5: TRANSPORTER-RETAINED BY TRANSPORTER



DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved, OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME 0040323		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.						
3. Generator's Name and Mailing Address Pioneer Plastics Company Pioneer Road Auburn, Maine 04210						A.State Manifest Document Number ME A 029946								
4. Generator's Phone 784 9111						B.State Generator's ID STATE								
5. Transporter 1 Company Name C.M. Laboratories, Inc.				6. US EPA ID Number ME D 00317		C.State Transporter's ID ME F38172								
7. Transporter 2 Company Name						D.Transporter's Phone 207 853 8395								
9. Designated Facility Name and Site Address Solvent Recovery Service of New England, Inc. Lazy Lane Southington, CT 06489						E.State Transporter's ID								
10. US EPA ID Number 0203 1171750						F.Transporter's Phone								
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.		
a. RC Waste Flammable Solid, n.o.s. Flammable Solid UN 1225 (1002)						004		02000				E 003		
b. RC Waste Flammable Solid, n.o.s. Flammable Solid UN 1225 (1001)						007		03500				D 001		
c. RC Waste Resin Solution Flammable Liquid UN 1266 (1003)						002		00110				E 003		
d. RC Waste Resin Solution Flammable Liquid UN 1266 (1002)						001		00055				E 003		
J. Additional Descriptions for Materials Listed Above a. Chlorg Liner b. Phenol Resin c. Acetone Polyesterr d. Polyester Resin						K.Handling Codes for Wastes Listed Above a. 301 b. - c. 302 d. -								
15. Special Handling Instructions and Additional Information 11.0. PIN 020722 TD 12.0. PIN 020721 TD 11.0. PIN 020400 TD 12.0. PIN 020402 TD														
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 complies with applicable regulations.														
Printed/Typed Name T. J. ...					Signature T. J. ...					Month Day Year 11 17 90				
17. Transporter 1 Acknowledgement of Receipt of Materials										Date				
Printed/Typed Name KEVIN E. DEAN Sr.					Signature Kevin E. Dean					Month Day Year 11 17 90				
18. Transporter 2 Acknowledgement of Receipt of Materials										Date				
Printed/Typed Name					Signature					Month Day Year				
19. Discrepancy Indication Space														
20. Facility Owner/Operator Certification of receipt of hazardous materials covered by this manifest.														
Printed/Typed Name					Signature					Month Day Year				

TRANSPORTER COPY

ME A 029946

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spills within Maine, contact DEP, Oil and Hazardous Materials Control at 1-482-0777.

STATE OF CONNECTICUT DEPARTMENT OF ENVIRONMENTAL PROTECTION Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST form with sections for Generator's Name, Transporter 1/2, Facility Name, Waste Description, Containers, and Certifications.

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3338

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER U.S. COAST GUARD 1 800 424 8802

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125394

GENERATOR

TRANSPORTER

FACILITY

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION**
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106

Please print or type Form designed for use on elite (12-pitch) typewriter.

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No ME D 9 8 0 7 3 1 1 4 5 0 0 0 1		Manifest Document No 0001		2 Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State law					
3 Generator's Name and Mailing Address State of Maine-Dept. of Environmental Protection State House Station 17, Augusta, ME 04333						A State Manifest Document Number CT C 0167859							
4 Generator's Phone 307 289-2651						B State Gen. ID ME 0433							
5 Transporter 1 Company Name C.M. Laboratories, Inc.			6 US EPA ID Number ME D 0 8 3 1 7 9 9 4 5			C State Tran. ID ME 0433			D Tran. Phone 307 E. 112-3085				
7 Transporter 2 Company Name			8 US EPA ID Number			E State Tran. ID ME T 38171			F Tran. Phone				
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489						10 US EPA ID Number CT D 0 0 9 7 1 7 6 0 4				G State Facility's ID			
11 US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)						12 Containers No Type		13 Total Quantity		14 Unit Wt/Vol		15 Waste No.	
a 10 Hazardous Waste Liquid, n.o.s. (P001) CRM-B MA 2189						001 DM		00030		G		P001	
b 10 Hazardous Waste Liquid, n.o.s. (P001) CRM-E MA 2189						001 DM		00055		G		P001	
c Non-hazardous, Non-hazardous Material Hazard Class: N/A (N/A) Number: Not Applicable						001 DM		00015 P				NONE	
d Non-hazardous Liquid, n.o.s. Hazard Class: N/A (N/A) Number: Not Applicable						001 DM		00055		G		NONE	
16 Additional Descriptions for Materials Listed Above a. chlorinated solvent 304 b. petroleum oils 704 c. sodium acetate 304 d. vegetable oil 204 resins 204						K Handling Codes for Wastes Listed Above 304, 704, 204							
15 Special Handling Instructions and Additional Information UN 15794-20 (D) UN 15794-20													
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper name, hazard class and ID number, packaged, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable Federal, State and National government regulations, and all applicable State laws and regulations. I am a generator of hazardous waste and I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be practicable and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to man, 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 elect the best waste management method that is available to me and that I can afford.													
Printed Name DENNIS W. PHILLIPS						Signature <i>Dennis W. Phillips</i>			Month Day Year 06/19/88				
17 Transporter 1 Acknowledgment Receipt of Materials Printed Name KEVIN J. ROSE						Signature <i>Kevin J. Rose</i>			Month Day Year 06/19/88				
18 Transporter 2 Acknowledgment Receipt of Materials Printed Name						Signature			Month Day Year				
19 Discrepancies and Remarks													
20 Facility Owner/Operator Certification I receive of hazardous materials covered by this manifest except as noted in item 19 Printed Name ALLAN B. PETERSON						Signature <i>Allan B. Peterson</i>			Month Day Year 06/19/88				

COPY 5: TRANSPORTER 1 - Retained by Transporter

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0167859

**STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106**



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP. OIL AND CHEMICAL SPILLS AT (203) 566-3338
IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER U.S. COAST GUARD 1 800 474 6812

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. 0125366	Manifest Document No.	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law	
Generator's Name and Mailing Address Chag Clean Furniture Rt. 202 Alfred, ME 04002				A. State Manifest Document Number CTC 0125366		
4 Generator's Phone (207) 324-9670	6. US EPA ID Number ME D 0 8 3 1 7 9 9 4 5		B. State Facility ID 000440			
5 Transporter 1 Company Name C. M. Laboratories, Inc.	8. US EPA ID Number		C. State Facility ID 000440			
7 Transporter 2 Company Name	10. US EPA ID Number CT D 0 0 9 7 1 7 6 0 4		D. State Facility ID 000440			
9 Designated Facility Name and Site Address Solvents Recovery Service P.O. Box 362 Ledy Lane Southington, CT 06489				E. State Facility ID 000440		
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
a. RC Waste Combustible Solid HCS Combustible Solid NA9189 P003		No. 008 Type DM	00440	G	0003	
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. 012534-ID				b.		
b.				d.		
15 Special Handling Instructions and Additional Information						
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and 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 HARRY B. CLARK		Signature <i>Harry B. Clark</i>		Month Day Year 12/1997		
17 Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name KEVIN E. DAVY JR		Signature <i>Kevin E. Davy Jr</i>		Month Day Year 12/1997		
18 Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month Day Year		
19 Discrepancy Indication Space						
20 Facility Owner/Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19						
Printed/Typed Name		Signature		Month Day Year		

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125366

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State Office Building, Hartford, CT 06106



PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter)

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. N.H.D.0.0.1.0.8.9.1.8.4	Manifest Date 0.7.87	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law	
GENERATOR'S Name and Mailing Address Concord Litho Co., Inc. 92 Old Turnpike Rd. Concord, NH 03301				A. State Manifest Document Number CT B 0082703		
4. GENERATOR'S Phone: 603 225-3328				B. State Gen. ID		
5. TRANSPORTER 1 Company Name C.M.Laboratories, Inc.		5. US EPA ID Number ME D.C.8.3.1.7.9.9.45		C. State Tran. ID. ME 20130		
7. TRANSPORTER 2 Company Name		8. US EPA ID Number		D. Tran. Phone: 707 777-2689		
9. DESIGNATED FACILITY Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				E. State Tran. ID.		
10. US EPA ID Number CT D 0 0 9 7 1 7 6 0 4				F. Tran. Phone ()		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number): Non-Hazardous Material Hazard Class: N/A ID Number: N/A				G. State Facility's ID		
				H. Facility's Phone: 203 628-8084		
		12. Containers		13. Total Quantity		14. Unit Wt./Vol.
		No. Type				I. Waste No.
		13 DM		.715		G N/A
J. Handling Codes for Wastes Listed Above						
K. SPECIAL HANDLING				6 each of the above drums were originally wrapped in Manifest #PC003520 of 11/26/86 to Clean Harbors of Braintree, Inc. where they were accepted, but subsequently rejected due to the newly instituted Island Sand		
L. GENERATOR'S CERTIFICATION: I certify that the wastes listed above have been and accurately described above by proper shipping name and are classified as such in accordance with the applicable Federal, State, and local regulations for transport by highway according to applicable international and national governmental regulations and are being transported in accordance with applicable regulations.						
Unless I am a small quantity generator, I hereby certify that I have made a waste minimization certification under Section 3002 of the RCRA. I hereby certify that I have made a waste minimization certification of waste generated to the degree that is determined to be feasible in light of the current technology, treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.						
Printed/Typed Name				Signature		Date Month Day Year
TRANSPORTER 1				Signature		Date Month Day Year
FACILITY OWNER OR OPERATOR				Signature		Date Month Day Year

IN THE STATE OF CONNECTICUT THE NATIONAL REGISTERED CHEMICAL SPILL REPORTING AND REMEDIATION ACT (NRCSRA) IS APPLICABLE TO ALL CHEMICAL SPILLS OF HAZARDOUS MATERIALS.

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State Office Building, Hartford, CT 06106



PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. MD001089184	Manifest Document No. 00001	2 Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law	
GENERATOR'S Name and Mailing Address Concord Litho Co., Inc. 92 Old Turnpike Rd. Concord, NH 03301				3 State Manifest Document Number CT B 0082716		
4 GENERATOR'S Phone: 603 225-3328				B State Gen ID		
5 TRANSPORTER 1 Company Name C.M. Laboratories, Inc.		6 US EPA ID Number MD0083179945		C State Tran ID ME 263439		D Tran Phone: 203 772-3689
7 TRANSPORTER 2 Company Name		8 US EPA ID Number		E State Tran ID		F Tran Phone
9 DESIGNATED FACILITY Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10 US EPA ID Number CTD009717604		G State Facility ID		
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12 Containers	13 Total Quantity	14 Unit Wt/Vol
Non Hazardous Material Hazard Class: N/A ID Number: N/A				No	Type	Waste No.
				100.61 d m 004.4.0 G		NOHE
15 Additional Descriptions for Materials Listed Above unused printing ink PIN014248-DD				H Hierarchy Codes for Wastes Listed Above		
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		Signature		Month Day Year		
[Signature]		[Signature]		12 12 71		
17 TRANSPORTER 1 Acknowledgement (Receipt) (Date)						
Printed, Typed Name		Signature		Month Day Year		
[Signature]		[Signature]		12 12 71		
18 TRANSPORTER 2 Acknowledgement (Receipt) (Date)						
Printed, Typed Name		Signature		Month Day Year		
[Signature]		[Signature]		12 12 71		
19 FACILITY OWNER OR OPERATOR						
Printed, Typed Name		Signature		Month Day Year		
[Signature]		[Signature]		12 12 71		

HAZARDOUS WASTE MANAGEMENT PROGRAM

West Building, 103 South Main Street

Waterbury, Vermont 05676

(802)244-8702

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039 Expires 1-30-98

and if within Vermont, The Vermont Department of Public Safety 1-800-642-6242

If the cause of a spill or emergency, contact the National Response Center 1-800-424-6242

Copy 5: Transporter 1

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. VT D 0 0 1 0 8 1 2 1 5		Manifest Document No.		2. Page 1 of 1		Information on the based areas is not required by Federal law.					
3. Generator's Name and Mailing Address Beecher Falls, Div. of Ethan Allen, Inc., Main Street Beecher Falls, VT 05902						A. State Manifest Document Number VT 0024815							
4. Generator's Phone (802) 266-3355						B. State Generator's ID SAME							
5. Transporter 1 Company Name C.M. Laboratories, Inc.						6. US EPA ID Number ME D 0 8 3 1 7 9 9 4 5							
7. Transporter 2 Company Name						C. State Transporter's ID ME F38172							
8. US EPA ID Number						D. Transporter's Phone (207) 883-8395							
9. Designated Facility Name and Site Address Solvent Recovery Service of New England, Inc. Lazv Lane, Southington, CT 06489						E. State Transporter's ID							
10. US EPA ID Number Q T D 0 0 9 7 1 7 9 0 4						F. Transporter's Phone							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt./Vol		1. Waste No.	
a. RQ Waste Flammable Liquid n.o.s. Flammable Liquid						UN 1993 (F003) (F003) 0017400055						F005 F003	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above Waste Stain & Thinner						K. Handling Codes for Wastes Listed Above a. 1 c. 1							
b.						d.		e.		f.			
15. Special Handling Instructions and Additional Information 11a. 020691 FD													
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 transportation, and are according to applicable international and national government regulations, and all applicable State law and 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 that is economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which might reduce a 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 the quantity of waste, the best waste management method that is available to me and that I can afford.													
Printed/Typed Name BRENDON I. COTE						Signature <i>Brendon I. Cote</i>						Month/Day/Year 01/07/90	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Kevin E. Duran, SE.						Signature <i>Kevin E. Duran</i>						Month/Day/Year 01/09/90	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name						Signature						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						Month/Day/Year							

VT 0024815

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST PROGRAM, State Office Building, Hartford, CT 06106

John Vespa
Addendum

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME D 0 0 0 1 0 9 4 3 0 9 0 0 1	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law.	
Generator's Name and Mailing Address Gaillard Industries Oak Street P.O. Box 179 Gailford, ME 04443				A. State Manifest Document Number CT C 0125399		
4. Generator's Phone (207) 875-3331		6. US EPA ID Number ME D 0 0 8 3 1 7 9 9 4 5		C. State Transporter ID No. 01875		
5. Transporter 1 Company Name C.M. Laboratories, Inc.		8. US EPA ID Number		D. Tran. Phone (207) 772-3689		
7. Transporter 2 Company Name		10. US EPA ID Number		E. State Tran. ID		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Ledy Lane, Southington, CT 06489		10. US EPA ID Number CT D 0 0 9 7 1 7 6 0 4		G. State Facility's ID		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
a. Non Hazardous Waste Solid Hazard Class: N/A UN/NA Number: N/A				0022	00987	P N/A
b. Non Hazardous Waste Solid Hazard Class: N/A UN/NA Number: N/A				0022	00501	P N/A
Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. PEI # 1523-03 <i>Bob Dr...</i>				a. <i>CPD</i>		
b. PEI # 1524-03 <i>SOM</i>				b. <i>CPD</i>		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.						
*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 <i>Kevin E. Quinn Sr.</i>			Signature <i>Kevin E. Quinn Sr.</i>		Month Day Year <i>12/19/88</i>	
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name <i>Kevin E. Quinn Sr.</i>			Signature <i>Kevin E. Quinn Sr.</i>		Month Day Year <i>12/19/88</i>	
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name			Signature		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		Month Day Year	

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3338

FOR SPILLS OUTSIDE OF CONNECTICUT, CONTACT THE NATIONAL RESPONSE CENTER AT (800) 421-8802

IF THE LEVEL OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER AT (800) 421-8802

COPY 5: TRANSPORTER 1 - Retained by Transporter CT C 0125399



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-91

TRANSPORTER COPY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME0001065588		Manifest Document No. 1-1-1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.					
3. Generator's Name and Mailing Address IRVING THAWING Co. MAIN ST HAZILAND MAINE 04943						A. State Manifest Document Number ME A 030023							
4. Generator's Phone (207) 938 4491						B. State Generator's ID SAME							
5. Transporter 1 Company Name C M LABORATORIES INC.				6. US EPA ID Number ME00085467612		C. State Transporter's ID MEF38172							
7. Transporter 2 Company Name						D. Transporter's Phone 207 88 2535							
9. Designated Facility Name and Site Address LIZZYLANE Southport CT 06489						E. State Transporter's ID							
10. US EPA ID Number CTD009717604						G. State Facility ID PUMPK 362							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. RQ Waste Flammable Liquid nos (FOO3) Flammable Liquid UN1993 (Toluene, Xylene)						0070000385		6		G		FOO3 FOO5 DOO1	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a. Toluene, Xylene, Butyl Acetate						b.							
c.						d.							
16. Special Handling Instructions and Additional Information HAZ. FIW # 020389 FD						Emergency Numbers C.M. LAB 207 88 2535 IRVING 207 938 4491 DOT ERG # 27-36							
18. 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.										I am a large quantity generator. I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.			
Printed/Typed Name					Signature					Month Day Year			
										01/16/91			
17. Transporter 1 Acknowledgement or Receipt of Materials										Date			
Printed/Typed Name					Signature					Month Day Year			
KEVIN E. DURHAM JR					Kevin E. Durham					01/16/91			
18. Transporter 2 Acknowledgement or Receipt of Materials										Date			
Printed/Typed Name					Signature					Month Day Year			
19. Discrepancy Indication Space													
20. I, the undersigned, certify that I am the generator, transporter, or receiver of hazardous materials covered by this manifest (except as noted in item 11).										Date			
Printed/Typed Name					Signature					Month Day Year			
Allen B Peterson					Allen B Peterson					01/17/91			

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. In Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-833-0777.

ME A 030023



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME 0007 1174 0210	Manifest Document No. 11111	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State Law.	
3. Generator's Name and Mailing Address Maine Yankee Atomic Power Company Ferry Road Parley's Point Wiscasset, Maine 04578				A. State Manifest Document Number ME A 029993		
4. Generator's Phone ()				B. State Generator's ID		
5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME 0009 1414		C. State Transporter's ID ME 00172		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Ledy Lane Southington, CT 06489				E. State Transporter's ID		
				F. Transporter's Phone		
10. US EPA ID Number ME 0009 1717 4014				G. State Facility's ID P.O. Box 300 Southington, CT		
				H. Facility's Phone 203 621 8383		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		14. Unit
		No. Type		Quantity		Wt/Vol
a. RC Waste Combustible Liquid H.C.S. NA 1993 Combustible Liquid		008		00440		
b. Hazardous Waste Solid H.C.S. NA 9183 Solid		001		00405		
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. CL1				b.		
c.				d.		
d. Solvent Sealed						
e. Absorbent						
15. Special Handling Instructions and Additional Information						
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 EILEEN M. HEATH		Signature Eileen M. Heath		Month Day Year 04 25 90		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name KEVIN E. DURAN JR.		Signature Kevin E. Duran		Month Day Year 04 25 90		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy/Implication space						
20. Facility Operator's Certification of Receipt of hazardous materials covered by this manifest except as noted in Item 19						
Printed/Typed Name Allen B. Peterson		Signature Allen B. Peterson		Month Day Year 04 26 90		

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802.
 For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-0777.

TRANSPORTER COPY

ME A 029993

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State Office Building, Hartford, CT 06106



PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. V.T.D.0.0.2.0.7.4.8.9.6	Manifest Document No. 000001	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.
3. GENERATOR'S Name and Mailing Address Queen City Waste P.O. Box 756 Burlington, VT 05402				State Manifest Document Number CT B 0082721	
4. GENERATOR'S Phone 802 864-8565		6. US EPA ID Number ME D 0 8 3 1 7 9 9 4 3		State Gen. ID	
5. TRANSPORTER 1 Company Name C.M. Laboratories, Inc.		8. US EPA ID Number		C. State Tran. ID ME 261630	
7. TRANSPORTER 2 Company Name		10. US EPA ID Number		D. Tran. Phone 787 788-3689	
DESIGNATED FACILITY Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489				E. State Tran. ID	
				F. Tran. Phone	
				G. State Facility ID	
				H. EPA ID Number 203 621-8383	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) BQ Waste Ink UN1210 Flammable Liquid (H228) EPA Ignitability			12. Containers	13. Total Quantity	14. Unit Wt. Vol
			No.	Type	Waste No.
			100	7 P	3.83 G D 00 1
15. Additional Descriptions for Materials Listed Above PIN 014505-ID			16. Additional Descriptions of Wastes Listed Above		
17. SPECIAL HANDLING Instructions and Additions (Optional)					
18. GENERATOR'S CERTIFICATION. I, the undersigned, hereby certify that the contents of this manifest are true and correct, and that the materials described herein are properly classified, packaged, marked and labeled, and are in full compliance with all applicable Federal, State, and local laws, regulations, and orders. I also certify that I have a program in place to ensure that the materials described herein are properly managed and that I have selected the method of treatment, storage, or disposal which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name		Signature		Date	
J. J. Sullivan		<i>[Signature]</i>		05/29/87	
19. TRANSPORTER 1 Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Date	
Kevin E. Dugan		<i>[Signature]</i>		05/29/87	
20. TRANSPORTER 2 Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Date	
21. DISCREPANCY					
22. FACILITY OWNER OR OPERATOR					
Printed/Typed Name		Signature		Date	

15-100-0001 (Rev. 1-87) (Hazardous Waste Manifest) (Form designed for use on elite (12-pitch) typewriter.)

15-100-0001 (Rev. 1-87) (Hazardous Waste Manifest) (Form designed for use on elite (12-pitch) typewriter.)



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME1201617014131949		Manifest Document No. 11111111		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law						
3. Generator's Name and Mailing Address Rockwood Systems, Inc. 30 Second Street South Portland, Maine 04106						A.State Manifest Document Number ME A 029975								
4. Generator's Phone 207 706 2243						B.State Generator's ID								
5. Transporter 1 Company Name C.N. Laboratories, Inc.						C.State Transporter's ID ME F38172								
6. US EPA ID Number 1499999999999999						D.Transporter's Phone 207 850 3395								
7. Transporter 2 Company Name						E.State Transporter's ID								
8. US EPA ID Number						F.Transporter's Phone								
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane Southampton, CT						G.State Facility's ID D. O. Box 362 Southampton, CT 06485								
10. US EPA ID Number						H. Facility's Phone 203 421 9299								
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.		
a. Non Hazardous Material						001		00055		CR 02				
b. Waste Combustible Liquid N.O.S.						002		00100		0001				
c.														
d.														
J. Additional Descriptions for Materials Listed Above Acetic Acid						K.Handling Codes for Wastes Listed Above T20								
15. Special Handling Instructions and Additional Information U.S. DOT 30450														
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, 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 have used.														
Printed/Typed Name Donall C. Bennett					Signature <i>[Signature]</i>					Month Day Year 12 30 90				
17. Transporter 1 Acknowledgement of Receipt of Materials										Date				
Printed/Typed Name Kevin E. Lichner Jr					Signature <i>[Signature]</i>					Month Day Year 12 30 90				
18. Transporter 2 Acknowledgement of Receipt of Materials										Date				
Printed/Typed Name					Signature					Month Day Year				
19. Discrepancy Indication Space														
20. Facility Owner or Operator: Certification of receipt of hazardous material received by me from generator on this date										Date				
Printed/Typed Name					Signature					Month Day Year				

TRANSPORTER COPY

In case of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. In Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-833-0777.

ME A 029975



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME ID 0157045999100207		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law			
3. Generator's Name and Mailing Address Rockwood Systems, Inc. 20 Second Street, South Portland, ME 041065				A. State Manifest Document Number ME A 029940		B. State Generator's ID SAME					
4. Generator's Phone (207) 799-3341		5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME ID 0183117994		C. State Transporter's ID ME E30172		D. Transporter's Phone 207-883-8395			
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 Solvent Recovery Service of New England, Lazy Lane Southington, CT 06489				10. US EPA ID Number CT ID 019717007		G. State Facility's ID P.O. Box 362, Southington,		H. Facility's Phone 203-621-8383			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
a. Non Hazardous NONE						NA CR04		201 DM 001000		CR04	
b. Non Hazardous NONE						NA CR05		201 DM 001000		CR05	
c. Waste Isopropyl Alcohol Flammable liquid						UN1219 (D001)		201 DM 010050	G	D001	
d.											
1. Additional Descriptions for Materials Listed Above Ila. Res c. Obsolete Isopropanol						K. Handling Codes for Wastes Listed Above a. S01 b. S10 c. T001 d.					
15. Special Handling Instructions and Additional Information Ila. PIN 020788-ID Iib. PIN 020789-ID						(11 C) obsolete Isopropanol Alcohol (PIN 204512)					
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 is approved.											
Printed/Typed Name Donald C. Ferratt				Signature [Signature]				Month Day Year 10/11/90			
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name Terri E. [Name]				Signature [Signature]		Month Day Year 10/11/90	
18. Transporter 2 Acknowledgement of Receipt of Materials				Printed/Typed Name				Signature		Month Day Year	
19. Discrepancy Indication Space											
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest (Required for all)											
Printed/Typed Name				Signature				Month Day Year			

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-424-8802-0777.

TRANSPORTER COPY

ME A 029940



STATE OF MAINE
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		3. Generator's US EPA ID No. ME D 0717 25046	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State Law.			
3. Generator Name and Mailing Address MAINE POLY INC ROUTE 202 GROSSVILLE MAINE 04236			A. State Manifest Document Number ME A 030048		B. State Generator's ID SAME			
4. Generator's Phone 207 946 7440		6. US EPA ID Number MED 9165 707012		C. State Transporter's ID ME F38172		D. Transporter's Phone 601 025 0324		
5. Transporter 1 Company Name C M WILSON TORRES INC		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone		
7. Transporter 2 Company Name		10. US EPA ID Number		G. State Facility's ID ME 150X 362		H. Facility's Phone 203 621-8363		
9. Designated Facility Name and Site Address WILSON TORRES INC 1 NEW BRIDGE LORRY HOUSE SOUTHINGTON CT 06489 CT D009 7170 79			11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. K2 WALK FLUM. 45 LBS NO 3 Titanium Hexafluoride UN1993 7001		b. 009 #400475G		Dose				
b.								
c.								
d.								
J. Additional Descriptions for Materials Listed Above WALK INK S... ...				K. Handling Codes for Wastes Listed Above a. b. c. d.				
15. Special Handling Instructions and Additional Information 119. IN # 070314 FD								
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 use.								
Printed/Typed Name Allen B. Peterson				Signature Allen B. Peterson		Month Day Year 07 26 90		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name KEVIN E. DUNN JR								
Signature Kevin E. Dunn Jr				Month Day Year 07 26 90				
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name								
Signature				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 15. Printed/Typed Name Allen B. Peterson								
Signature Allen B. Peterson				Month Day Year 07 26 90				

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-877-0777.

TRANSPORTER COPY

ME A U30048



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter).

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME X 0 2 0 0 0 0 0 0 0 0 0 0 1		Manifest Document No. 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.					
3. Generator's Name and Mailing Address Just Cabinets Inc. Porter Road Fryeburg Maine 04037 207 935 2200				A. State Manifest Document Number ME A 039069									
4. Generator's Phone ()				B. State Generator ID									
5. Transporter 1 Company Name C.S. Laboratories, Inc.				6. US EPA ID Number ME D 9 8 5 4 6 7 5 1		C. State Transporter ID ME F 38172							
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter Phone 207 883 8395							
9. Designated Facility Name and Site Address Solvents Recovery service of New England, Inc. Lazy Lane Southington, Ct. 06489				10. US EPA ID Number CT D 0 0 9 7 4 7 0 0		E. State Facility ID S.C. Box 362 Southington, Ct. 06489							
						F. Facility Phone 203 621 8383							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit		15. Waste No.	
a. RC Waste Flammable Solid n.o.s. UN 1225 Flammable Solid (F003) (D001) (P005)						002		00580		2		RC01 F003 P005	
b.													
c.													
d.													
16. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a. Stains Residues, Resol						a.							
c. Nylene Acetone						c.							
15. Special Handling Instructions and Additional Information													
15. SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION RC01 F003 P005													
17. 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.										Month Day Year 07 25 90			
Printed/Typed Name John J. Bates				Signature <i>[Signature]</i>									
17. Transporter 1 Acknowledgement of Receipt of Materials										Date			
Printed/Typed Name Kevin E. Jackson Jr.				Signature <i>[Signature]</i>				Month Day Year 07 25 90					
18. Transporter 2 Acknowledgement of Receipt of Materials										Date			
Printed/Typed Name				Signature				Month Day Year					
19. Discrepancy Indication Space													
20. Receiver/Operator Certification of receipt of hazardous materials covered by this manifest (except as noted in item 19)										Date			
Printed/Typed Name Allan B. Peterson				Signature <i>[Signature]</i>				Month Day Year 09 19 90					

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill in Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-877-0777.

TRANSPORTER COPY

ME A U30069



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved: OMB No. 2050-0039. Expires 9-30-91

TRANSPORTER COPY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME D 9 2 5 1 6 7 6 1 2	Manifest Document No. 1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State Law.
3. Generator's Name and Mailing Address Roland's Auto Body 120 Pleasant Street Brunswick, Maine 04011		4. Generator's Phone 207 729 0844		A. State Manifest Document Number ME A 030039	B. State Generator ID ME 0000000000
5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME D 9 8 5 4 6 7 6 1		C. State Transporter ID ME F 38172	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 207 883 8385	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England Inc. Lazy Lane Southington, CT. 06489		10. US EPA ID Number E 1 6 6 0 0 9 7 1 7 6 0		G. State Facility ID E 1 6 6 0 0 9 7 1 7 6 0	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. 30 Waste Flammable Liquid n.o.s. (1993) Flammable Liquid (2005)		30	100055	C	F 0 0 5
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above a. Toluene, Ethyl Acetate MSK Pigments		K. Handling Codes for Wastes Listed Above a. b. c. d.			
15. Special Handling instructions and Additional Information 11 2 1 20004 10					
5. 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 ROLAND J NORMAND		Signature Roland J Normand		Month Day Year 07 25 90	
17. Transporter 1 Acknowledgement or Receipt of Materials		Printed/Typed Name KEVIN E. JENNIX		Signature Kevin E. Jennix	
3. Transporter 2 Acknowledgement or Receipt of Materials		Printed/Typed Name		Signature	
7. Discrepancy, indicate on space					
19. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 15					
Printed/Typed Name Allan B. PETERSON		Signature Allan B Peterson		Month Day Year 10 26 90	

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, DW and Hazardous Materials Control at 1-800-833-7777.

ME A 030039



VERMONT AGENCY OF NATURAL RESOURCES
HAZARDOUS MATERIALS MANAGEMENT
103 South Main Street
Waterbury, Vermont 05676
802-244-8702

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

If a spill or emergency, contact the National Response Center 1-800-424-8802 and if within Vermont, The Vermont Department of Public Safety 1-800-641-5005

Copy to: Destination State-Mailed by TSDP

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address Simpson Paper Company, Centennial Mill Riverside Avenue Gilman, Vermont 05904		VT'D10141315116121101		A. State Manifest Document Number VT 0029125		B. Generation Site (if different)	
4. Generator's Phone 802-892-5515		6. US EPA ID Number		C. State Transporter's ID MEF38172		D. Transporter's Phone 207 883-8395	
5. Transporter 1 Company Name C.M Laboratories, Inc.		7. US EPA ID Number MIE'D191815141617161112		E. State Transporter's ID		F. Transporter's Phone	
7. Transporter 2 Company Name		8. US EPA ID Number		G. State Facility's ID		H. Facility's Phone	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane, Southington, CT 06489		10. US EPA ID Number IC'T'D101019171117161016		P.O. Box 362, Southington, CT		802-892-5515	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	
a. RQ Waste Oil n.o.s. (D001) Combustible Liquid NA1270		009 DIM		00495		G D001	
b. RQ Waste Flammable Liquid n.o.s. (D001) (P002) (P005) Flammable Liquid UN1993		XXXXXXXXXX		XXXXXXXXXX		D001 E003 F005	
c. Non Regulated Material Non Regulated		NONE (CR02) (VT 04)		004 DIM		P CR02 VT 04	
J. Additional Descriptions for Materials Listed Above Waste Oil #2		c. Oily Debris		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information 11a. PIN 017723 FD XXXXXXXXXX 11c. PIN 017724 GD		Signature _____ Date _____					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State law and 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.							
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name KEVIN E DURAN Sr		Signature Kevin E Duran Sr		Month Day Year 11 20 03 90			
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		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		Month Day Year			

VT 0029125



VERMONT AGENCY OF NATURAL RESOURCES
HAZARDOUS MATERIALS MANAGEMENT
103 South Main Street
Waterbury, Vermont 05676
802-244-8702

Print or type (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

In the event of a spill, contact the National Response Center 1-800-424-8802 and if within Vermont, The Vermont Department of Public Safety 1-800-641-5005.

Copy 5: Transporter 1

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. VT 01 D 01 4 3 5 1 6 2 1 0		Manifest Document No. 00001		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3 Generator's Name and Mailing Address Slipman Paper Company (Formerly Georgia Pacific Corp.) Riverside Street Gilman, Vermont 05904				6. US EPA ID Number ME 01 D 91 8 5 4 6 7 6 1 2		A. State Manifest Document Number VT 0029104		B. Generation Site (if different) P.O. Box 96 Gilman, VT.	
4 Generator's Phone (802) 892 5515		5 Transporter 1 Company Name C.M. Laboratories, Inc.		8. US EPA ID Number CT 01 D 01 9 7 1 7 6 0 4		C. State Transporter's ID ME F38172		D. Transporter's Phone 207 883 8395	
7 Transporter 2 Company Name		9 Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane Southington, CT. 06489		10. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12 Containers No.		13. Total Quantity		14 Unit Wt/Vol		L. Waste No.	
a. RC Waste Oil n.o.s. Combustible Liquid		b. NA 1270 (D001)		c. 018 DM 00990		d. G		e. D001	
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above					
a. Waste Oil # 2				a.					
b.				b.					
15 Special Handling Instructions and Additional Information 11 1. PIN # 017723 ED									
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State law and 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: Donald Signature: <i>Donald</i> Month Day Year: 04/18/90									
17 Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name: Kevin E. ... Signature: <i>Kevin E. ...</i> Month Day Year: 04/18/90									
18 Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name: Signature: 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: Allen B. Peterson Signature: <i>Allen B. Peterson</i> Month Day Year: 04/19/90									

VT 0000104



VERMONT AGENCY OF NATURAL RESOURCES
HAZARDOUS MATERIALS MANAGEMENT
103 South Main Street
Waterbury, Vermont 05676
802-244-8702

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

In an emergency, contact the National Response Center 1 800 424 8802 and if with Vermont, The Vermont Department of Public Safety 1 800 641 5005

Copy 5-Transporter 1

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3 Generator's Name and Mailing Address Simpson Paper Company Centennial Mill Riverside Avenue Gilman, Vermont 05904		V T D 0 4 3 5 1 6 2 1 0		A State Manifest Document Number VT 0029118			
4 Generator's Phone (802) 892 5515		5 Transporter 1 Company Name C.M. Laboratories, inc.		6 US EPA ID Number ME D 9 8 5 4 6 7 6 1 2		B. Generation Site (if different) P.O. Box 125 Gilman, Vermont	
7 Transporter 2 Company Name		8 US EPA ID Number		C. State Transporter's ID MEP93172		D. Transporter's Phone 802 883 8395	
9 Designated Facility Name and Site Address Solvents Recovery Service of New England, INC. Lazy Lane Southington, CT. 06489		10 US EPA ID Number CT D 0 0 9 7 1 7 6 0 4		E. State Transporter's ID		F. Transporter's Phone	
11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity		14 Unit Wt./Vol	
a. RC Waste Oil n.o.s. Combustible Liquid		NA 1270 (D001)		006 DM 00330		G D001	
b. RC Waste Flammable Liquid n.o.s. Flammable Liquid		UN 1993 (D001) (F003) (F005)		001 DM 00045		G D001 F003 F005	
c. Non Hazardous Material Non regulated		None (CR02) (VT 04)		002 D 00425		P CR02 VT 04	
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above					
a. Waste Oil # 2		c. Oily Debris		a.		c.	
b. Waste Paint		d.		b.		d.	
15 Special Handling instructions and Additional Information							
15 a. PIN 017723 ED 15 b. PIN 021309 ED 15 c. PIN 117724 ED							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State law and 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, I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name		Signature		Month		Day Year	
RONN R GIFFORD		<i>Ronn R. Gifford</i>		09		06 90	
17 Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Month Day Year	
		KEVIN E DUKHAN JR		<i>Kevin E Dukhan Jr</i>		09 06 90	
18 Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		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		Month		Day Year	
ALLA B PETERSON		<i>Alla B Peterson</i>		09		09 90	

GENERATOR

TRANSPORTER

FACILITY



VERMONT AGENCY OF NATURAL RESOURCES
HAZARDOUS MATERIALS MANAGEMENT

103 South Main Street
Waterbury, Vermont 05676
802-244-8702

print or type (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039. Expires 9-30-91

In the event of a spill or emergency, contact the National Response Center 1-800-424-8802 and if within Vermont, The Vermont Department of Public Safety 1-800-641-5005.

Copy 5 - Transporter 1 0029109

UNIFORM HAZARDOUS WASTE MANIFEST

1 Generator's US EPA ID No. **VT D 043516210** Manifest Document No. **1**

2. Page 1 of 1 Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address
Simpson Paper Company Riverside Ave Gilman, VT 05904
Centennial Mill

A. State Manifest Document Number
VT 0029109

4. Generator's Phone (302) 892 5515

B. Generation Site (if different)
P.O. Box 129 Gilman, VT

5. Transporter 1 Company Name **C.M. Laboratories, Inc** 6. US EPA ID Number **ME D 985467612**

C. State Transporter's ID **ME3612 05904**

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

D. Transporter's Phone **207 883 8395**

9. Designated Facility Name and Site Address
Solvents Recovery Service of New England, Inc.
Lazy Lane Southington, Ct. 06489

E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
P.O. Box 362

H. Facility's Phone
203 88 671 8383
P.O. Box 362 Southington Ct

11. US DOT Description (Including Proper Shipping Name, Hazara Class, and ID Number)

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol 15. Waste No.

11. US DOT Description (Including Proper Shipping Name, Hazara Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a.	PC waste Oil n.o.s. Combustible Liquid	009	D	00495	C	D001
b.	Waste Oil n.o.s.a. Combustible Liquid	006	D	00330	C	CR02
c.	Non Hazardous Non regulated Material	007	D	01944	B	CR02

J. Additional Descriptions for Materials Listed Above
a. **Waste Oil hv2**
b. **Hydraulic Oil**

K. Handling Codes for Wastes Listed Above
a. **City Debris**
b.

15. Special Handling Instructions and Additional Information
11 a. PIN 017728 ED 11 b. 017728 ED
11 c. PIN 170508 ED

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment have been and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are, in all respects, in proper condition for transport by highway according to applicable international and national government regulations, and any applicable State law and regulations.
I am a large quantity generator, I certify that I have a program in place to reduce the volume 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: **Paul Grogan** Signature: *Paul Grogan* Month Day Year: **06/11/90**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: **Kevin E. Duran** Signature: *Kevin E. Duran* Month Day Year: **06/11/90**

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

19. Discrepancy Indication (Shade)

20. Facility (Where the Generator has obtained receipt of hazardous materials covered by this manifest except as noted in item 19)
Printed/Typed Name: **Paul Grogan** Signature: *Paul Grogan* Month Day Year: **6/13/90**



STATE OF MAINE
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MEP000006304		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.					
3. Generator's Name and Mailing Address Steven Bluck-Cadillac 486 Elm Street Biddeford, Maine 04005						A.State Manifest Document Number ME A 030006							
4. Generator's Phone (207-283-1173)						B.State Generator's ID							
5. Transporter 1 Company Name C.M. Laboratories, Inc.				6. US EPA ID Number		C.State Transporter's ID MEF38172							
7. Transporter 2 Company Name						D.Transporter's Phone							
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lay Lane Southington, CT 06489						10. US EPA ID Number		E.State Transporter's ID					
						F.Transporter's Phone							
						G.State Facility's ID		H.Facility's Phone					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. NO. Waste Flammable Liquid n.o.s. UN 1993 Flammable Liquid						009		00495				1993	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K.Handling Codes for Wastes Listed Above							
a. Waste Thinner						a.							
c. Toxic, etc.						c.							
15. Special Handling Instructions and Additional Information 11 a. PIN # 021254													
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					Signature					Month Day Year			
17. Transporter 1 Acknowledgement of Receipt of Materials										NOV 30			
Printed/Typed Name					Signature					Month Day Year			
KEVIN E. DUCHAN JR.					<i>[Signature]</i>					NOV 30			
18. Transporter 2 Acknowledgement of Receipt of Materials										Date			
Printed/Typed Name					Signature					Month Day Year			
9. Discrepancy Indication Space													
20. Facility, Owner or Operator Certification of Receipt of Hazardous Materials Covered by This Manifest Except as Otherwise Indicated										Date			
Printed/Typed Name					Signature					Month Day Year			
PILL GRAY					<i>[Signature]</i>					11/19/90			

In the event of a spill, contact the National Response Center, U.S. Coast Guard at 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-2-0777.

TRANSPORTER COPY

ME A 030006



COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF ENVIRONMENTAL QUALITY ENGINEERING
DIVISION OF SOLID AND HAZARDOUS WASTE
One Winter Street
Boston, Massachusetts 02108

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator US EPA ID No. **MA D 0 9 1 5 0 1 8 9 0 0 0 0 0 1**
Manifest Document No.

2. Page 1 of 1 Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address
Tadco, Inc., Poole's Lane, Rockport, MA 01966

A. State Manifest Document Number
MA C232290

4. Generator's Phone (508) **546-7525**

B. State Gen. ID
SMR

5. Transporter 1 Company Name
C.M. Laboratories, Inc.

6. US EPA ID Number
ME D 9 8 5 4 6 7 6 1 2

C. State Trans. ID
ME F38172

7. Transporter 2 Company Name

8. US EPA ID Number

D. Transporter's Phone (207) **883-8395**
E. State Trans. ID

9. Designated Facility Name and Site Address
**Solvents Recovery Service of New England, Inc.
Lazy Lane, Southington, CT 06489**

10. US EPA ID Number
CT D 0 0 9 7 1 7 6 0 4

F. Transporter's Phone ()

G. State Facility's ID **Not Required**

H. Facility's Phone (203) **621-8383**

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers No.	13. Total Quantity	14. Unit Wt Vol	15. Waste No
--------------------	--------------------	-----------------	--------------

a. **RQ Waste Ink (Cellulosolve Acetate, Diisobutyl ketone)
Flammable Liquid UN 1210**

001D M00055	G	P 0 0 3	D 1 0 0 1
--------------------	----------	----------------	------------------

Material Name and Abbreviation, proper shipping name and hazard code
**Pigment Fillers, Cyclohexanone,
Cellulosolve Acetate, Xylene,
Diisobutyl Ketone**

Special Handling Instructions and Additional Information
PIN 020079-FD

ME EMERGENCY PHONE 1800-482-0777
C.M. Laboratories, Inc. 1207-883-8395

I, the undersigned, hereby declare that the contents of this consignment are fully and accurately described herein. The materials are properly classified, packaged, marked and labeled, and are in all respects in proper condition for transport in lawful commerce, applicable international and national government regulations.

The generator, transporter, and receiver have each been provided with a copy of this manifest and a copy of the instructions for the use of this manifest. The generator, transporter, and receiver have each been provided with a copy of the instructions for the use of this manifest.

Printed, Typed Name THOMAS FARINA	Signature <i>Thomas Farina</i>	Month 12	Day 17	Year 90
Transporter Acknowledgement of Receipt of Materials				
Printed, Typed Name KEVIN F. DURAN	Signature <i>Kevin F. Duran</i>	Month 12	Day 17	Year 90
Transporter Acknowledgement of Receipt of Materials				
Printed, Typed Name	Signature	Month	Day	Year

Discrepancy Indication Space

Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19

Printed, Typed Name Allen B. PETERSON	Signature <i>Allen B. Peterson</i>	Month 12	Day 17	Year 90
---	---------------------------------------	--------------------	------------------	-------------------

National Response Center (800) 424-8802

TRANSPORTER-RETAINED BY TRANSPORTER



COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF ENVIRONMENTAL QUALITY ENGINEERING
DIVISION OF SOLID AND HAZARDOUS WASTE

One Winter Street
Boston, Massachusetts 02108

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		Generator US EPA ID No. MAID 09115011890	Manifest Document No. 1	Page 1 of 1	Information in the shaded areas is not required by Federal law
3. Generator's Name and Mailing Address Tadco, Inc. pooles Lane Rockport, Mass. 01966			A. State Manifest Document Number MA C232304		B. State Gen. ID
4. Generator's Phone (508 546 7525)			C. State Trans. ID ME F38172		D. Transporter's Phone (207 883 8395)
5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME D 083179945	E. State Trans. ID		F. Transporter's Phone ()
7. Transporter 2 Company Name		8. US EPA ID Number	G. State Facility's ID Not Required		H. Facility's Phone (203 621 8383)
9. Designated Facility Name and Site Address Solvents recovery Service of New England, Inc. Lary Lane Southington, CT. 06489			10. US EPA ID Number CTD009717004		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. HQ Waste Flammable Ink Flammable Liquid UN 1210 (P003)			002	DMO0110	G P003
b.					
c.					
d.					
Additional Description (if any)			T 3/11/90		
13. Cyclohexanone Cellulosolve Acetate Kyle Disibutyl Ketone Pigments Fillers					
15. Special Handling Instructions and Additional Information 11 c. PIN # 020079 FD					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest are properly shipped in accordance with applicable federal, state, and local laws, regulations, and orders, and that all applicable international and national government regulations have been observed.					
Printed/Typed Name TONI FABINA			Signature <i>Toni Fabina</i>		Date 04/02/90
17. Transporter 1 Acknowledgement of Receipt of Materials			Printed/Typed Name KEVIN E. DURAN SR.		Signature <i>Kevin E. Duran Sr.</i>
					Date 04/02/90
18. Transporter 2 Acknowledgement of Receipt of Materials			Printed/Typed Name		Signature
					Date
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 15.					
Printed/Typed Name ALAN B. [Signature]			Signature <i>[Signature]</i>		Date 04/02/90

In case of emergency or spill, immediately call the National Response Center (800) 424-8802.

GENERATOR TRANSPORTER FACILITY

MA C232304 COPY>5: TRANSPORTER-RETAINED BY TRANSPORTER

DEPARTMENT OF ENVIRONMENTAL QUALITY CONTROL
 DIVISION OF SOLID AND HAZARDOUS WASTE
 One Winter Street
 Boston, Massachusetts 02108

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator US EPA ID No. MA D 0 9 1 5 0 1 8 9 0 0 0 0 0 1	Manifest Document No. 000001	2. Page of 1	Information in the shaded areas is not required by Federal law
3. Generator's Name and Mailing Address Tadco, Inc. Poole's Lane Rockport, Mass 01966			A. State Manifest Document Number MA C232308	B. State Gen. ID 8888	
4. Generator's Phone (508 546 7525)			C. State Trans. ID ME F38172	D. Transporter's Phone (207 883 8395)	
5. Transporter 1 Company Name C.M. Laboratories, Inc.			6. US EPA ID Number ME D 0 9 8 5 4 6 7 6 1 2	E. State Trans. ID	
7. Transporter 2 Company Name			8. US EPA ID Number	F. Transporter's Phone ()	
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc, Lary Lane Southington, CT. 06489			10. US EPA ID Number	G. State Facility's ID Not Required	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			H. Facility's Phone (203 621 8383)		
a. RQ Waste Ink Flammable Liquid			12. Containers		
UN 1210 (F003)			No.	Type	13. Total Quantity
			003	D	0001.00
					G
					700
Additional Description of Material and Labeling			14. Unit Wt Vol		
11.a. Pigments Filijaps, Cyclohexanone Cellulosic Acetate, Xylene, DIBK					
15. Special Handling Instructions and Additional Information					
11 a. PIN # 020079 FD					
16. GENERATOR'S CERTIFICATION. I hereby declare that the contents of this document were prepared by me or under my direct supervision and that the information is true and correct according to applicable international and national government regulations.					
Printed/Typed Name THOMAS FEATINA			Signature <i>Thomas Featina</i>		Date 04/19/90
17. Transporter 1 Acknowledgement of Receipt of Materials			Signature <i>Kevin E. Dugan</i>		Date 04/19/90
Printed/Typed Name KEVIN E. DUGAN			Signature		Date
18. Transporter 2 Acknowledgement of Receipt of Materials			Signature		Date
Printed/Typed Name			Signature		Date
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 Allan B. PETERSON			Signature <i>Allan B. Peterson</i>		Date 04/19/90

In case of emergency or spill, immediately call the National Response Center (800) 424-8802.

DO NOT WRITE IN THESE SPACES

MA C232308 COPY 5: TRANSPORTER-RETAINED BY TRANSPORTER



STATE OF MAINE

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME D 0 0 1 0 9 4 7 5 1		Manifest Document No. 11	2. Page 1 Of 1	Information in the shaded areas is not required by Federal law but may be required by State Law.	
3. Generator's Name and Mailing Address Tibberts Industries, Inc., Colcord Avenue Canaan, ME 04843				A. State Manifest Document Number ME A 030088		B. State Generator ID ME A 030088	
4. Generator's Phone (207) 526-3201		5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME D 0 8 5 4 6 7 6 1 1		C. State Transporter ID ME F 38172	
7. Transporter 2 Company Name General Chemical Corporation		8. US EPA ID Number MA D 0 1 9 3 7 1 0 7 0		D. Transporter's Phone 603-883-8895		E. State Transporter ID 508-872-5000	
9. Designated Facility Name and Site Address General Chemical Corporation, 105 Island St. Yarmouth, ME 04170				10. US EPA ID Number MA D 0 1 9 3 7 1 0 7 0		G. State Facility ID 508-822-5000	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers		13. Total Quantity	
a. PO Waste 1,1,1-Trichloroethane UN 2831 RFLA 2002				No. Type		Unit Wt/Vol Waste No.	
				001 b - 0005 c		T 0 0 2	
15. Special Handling Instructions and Additional Information				K. Handling Codes for Wastes Listed Above			
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 threats to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.				Printed/Typed Name: _____ Signature: <i>[Signature]</i> Month Day Year: 11/23/90			
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name: ACU... [Signature] Signature: <i>[Signature]</i> Month Day Year: 11/23/90			
18. Transporter 2 Acknowledgement of Receipt of Materials				Printed/Typed Name: _____ Signature: _____ Month Day Year: _____			
19. Discrepancy Indication Space							
20. Facility Owner or Operator Acknowledgement of Receipt of Hazardous Materials Covered by this Manifest, except as noted in Item 13.							
Printed/Typed Name: _____ Signature: _____ Month Day Year: _____				Date: _____			

In the event of a spill, contact the National Response Center, U.S. Coast Guard 1-800-485-4886. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-485-4886.

GENERATOR

TRANSPORTER

RECEIVER

TRANSPORTER COPY

ME A 030088



VERMONT AGENCY OF NATURAL RESOURCES
HAZARDOUS MATERIALS MANAGEMENT
103 South Main Street
Waterbury, Vermont 05676
802-244-8702

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No. VT D 0 6 9 9 1 1 8 7 3 0 0 1 9 7	Manifest Document No. 0 0 1 9 7	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address Union/Butterfield Baxter Avenue Derby Line, VT 05830				A. State Manifest Document Number VT 0028589			
4. Generator's Phone () (802)873-3106				B. Generator's Site (if different) same			
5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number M E D 0 8 3 1 7 9 9 4 5		C. State Transporter's ID ME F 38172		D. Transporter's Phone (802) 883-8395	
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 Solvent Recovery Service of New England, Inc. P.O. Box 362, Lazy Lane, Southington, CT 06489				10. US EPA ID Number C T D 0 0 9 7 1 7 6 0 4		G. State Facility's ID Box 362 Southington, CT	
				H. Facility's Phone (203) 625-8383			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.	
a. RQ Waste Combustible Liquid N.O.S. Combustible Liquid (D001) NA1993			0 0 4 D M	0 0 2 2 0	G	D001	
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
a. Petroleum Distillate/Oil		c.		a.		c.	
b.		c.		b.		d.	
15. Special Handling Instructions and Additional Information 11 A. 2TI #020612FD							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State law and 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 most appropriate 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 Jack Bullis		Signature <i>Jack Bullis</i>		Month Day Year 05 25 90			
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Kevin E. ...		Signature <i>Kevin E. ...</i>		Month Day Year 06 25 90			
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator Certification: I certify that hazardous materials covered by this manifest except as noted herein are...							
Printed/Typed Name Allen B. PETERSON		Signature <i>Allen B Peterson</i>		Month Day Year 06 28 90			

Copy 5: Transporter 1

0028589

In the event of a spill or emergency, contact the National Response Center 1-800-424-8802 and if within Vermont, The Vermont Department of Public Safety 1-800-641-5005.



COMMONWEALTH OF MASSACHUSETTS
 DEPARTMENT OF ENVIRONMENTAL QUALITY ENGINEERING
 DIVISION OF SOLID AND HAZARDOUS WASTE
 One Winter Street
 Boston, Massachusetts 02108

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator US EPA ID No. MA D 9 8 5 2 7 3 8 7 9	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address Waters Printing Company, 12 Waltham Street Wilmington, MA 01887			A. State Manifest Document Number MA C232321		
4. Generator's Phone (508) 657-8008			B. State Gen. ID. SAME		
5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number MA D 9 8 5 4 6 7 6 1 2	C. State Trans. ID. ME F38172		
7. Transporter 2 Company Name General Chemical Corporation		8. US EPA ID Number MA D 9 8 5 4 6 7 6 1 2	D. Transporter's Phone (207) 883-8395		
9. Designated Facility Name and Site Address Solvent Recovery Service of New England, Inc. Lasy Lane, Southington, CT 06489		10. US EPA ID Number CT D 0 0 9 7 1 7 6 0 4	E. State Trans. ID.		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers		
a. Waste Combustible Liquid N.O.S. Combustible			No.	Type	13. Total Quantity
NA 1993 D001			004	D	00220 G
b.					
c.					
d.					
15. Special Handling instructions and Additional Information			14. Unit Wt/Vol		
11a. Pin #021597 FD			Not Required		
15. Special Handling instructions and Additional Information			H. Facility's Phone (203) 621-8383		
16. GENERATOR CERTIFICATION: I hereby certify that the materials described herein are properly classified, packaged, marked and labeled, and are in proper condition for transport, in accordance with applicable international and national government regulations.					
Printed/Typed Name Douglas J Roberts			Signature <i>[Signature]</i>		Date 10/26/90
17. Transporter 1 Acknowledgement of Receipt of Materials			Date		
Printed/Typed Name Kevin E. Dineen Sr.			Signature <i>[Signature]</i>		Date 10/26/90
18. Transporter 2 Acknowledgement of Receipt of Materials			Date		
Printed/Typed Name			Signature		Date
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 11.					
Printed/Typed Name Kenneth W. McLeod			Signature <i>[Signature]</i>		Date 10/26/90

In case of emergency or spill, immediately call the National Response Center (800) 424-8802.

GENERATOR

TRANSPORTER

TRANSPORTER-RETAINED BY TRANSPORTER



STATE OF MAINE
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333

Please print or type. (Form designed for use on-elite (12-pitch) typewriter).

Form Approved. OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ME X 0 2 0 9 C 0 0 0 9		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.					
3. Generator's Name and Mailing Address The Yankee Stripper RTE 191 Rockport, Maine 04856						A. State Manifest Document Number ME A 030063							
4. Generator's Phone 207 236 4673						B. State Generator's ID No. ME 030063							
5. Transporter 1 Company Name C.M. Laboratories, Inc.				6. US EPA ID Number ME D 9 85 4 6 7 6 1 2		C. State Transporter's ID No. ME F38172							
7. Transporter 2 Company Name				8. US EPA ID Number		D. State Transporter's ID							
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lazy Lane Southington, CT. 06489						G. State Facility's ID No. CT D 0 0 9 7 1 7 6 0 4							
10. US EPA ID Number						H. Facility's Phone No. 203 621 8383							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
a. Flammable Solid n.o.s. UN 1325 Flammable Solid (D001) F 003						002 EM		01,060		P		D 0 0 1 P 0 0 3	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a. Waste Paint Solids						b.							
c.						d.							
15. Special Handling Instructions and Additional Information CERTIFICATE 4 INCINERATION REQUIRED													
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. 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, I am a small quantity generator. I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name Richard Benner						Signature <i>Richard Benner</i>				Month Day Year SEP 30			
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature <i>Kevin E. Duchan Sr.</i>				Month Day Year SEP 30			
Printed/Typed Name KEVIN E. DUCHAN SR.						Signature				Month Day Year			
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature				Month Day Year			
Printed/Typed Name						Signature				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 10.													
Printed/Typed Name						Signature				Month Day Year			

TRANSPORTER COPY

ME A 030063

In the event of a spill, contact the National Response Center, U.S. Coast Guard at 1-800-424-8802. For spill in Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-2-0777.

Solvents Recovery Service of New England
C.M. Laboratories

Name of Generator	Transaction Date (1)	Gallon Volume (2)	Name/Description of Who Selected the Site (3) ?	Waste Type (4) [For additional transactions only]
✓ Ethon Allen INC Island Pond Div.	1/9/87	(70M) 385	Manifest VT 0015488 Not Known	Flammable Solids - Ground Drum SOL
" "	" "	(26 DM) 1430	" " " "	" " " " " " LINE 11A + 11B.
✓ Ethon Allen INC Island Pond	4/16/87	20M 140M 160	Manifest VT 0016408	Flammable Solids - Ground Drum SOL
" "	" "	(18 DM) 990	" " " "	Flammable Solids GROUND. Drum SOL
✓ Ethon Allen INC	1/7/87 ?	100M 500M 650	Manifest VT 0010544 B Co's	Flammable Solids - GD = Ground Drum SOL
✓ Beecher Falls	1/7/87	20M 380M 385	" " " "	" " " " " "
✓	1/7/87	15 DM 150M 825	" " " "	" " " " " "
✓	10/6/87	5 DM 275	Manifest VT 0010545	" " " " " "
✓	10/6/87	8 DM 440	" " " "	" " " " " "
✓	4/1/87	8 DM 440	Manifest VT 0010548	" " " " " "
✓	4/1/87	6 DM 330	" " " "	" " " " " "
✓ Arrow Hart	3/30/90	8 DM 440	Manifest MBR 029977 NOT KNOWN	WASTE OIL Non Hazardous Non RCRA
✓ Arrow Hart	1/10/90	1 DM 85	Manifest CTC 0122548	Haz Waste Solid INCINERABLE Drum SOL = STORAGE
✓ Concord Litho	11/9/87	9 DM 495	Manifest CTB 0082706 B M/Gual	Non Hazardous Non RCRA
✓ Carroll Industries	4/13/87	29 DM 1595	Manifest CTB 0082704 NOT KNOWN	Flammable Solids GD = Ground Drum SOL

ATTACHMENT II.C. (continued)

Additional Transactions Form

Name of Respondent: C.M. LOBOIZATORIS INC.

<u>Column 1</u>	<u>Column 2</u>	<u>Column 3</u>	<u>Column 4</u>	<u>Column 5</u>
Date of Transaction	Volume of Transaction	Waste Type	Description of Documentation (please attach)	Name and Address of Generator (for brokered transactions only)
✓ 1/9/87	385	Flammable Solids	MANIFEST VT0015788	ETG AND ALLEN ISLAND POND.
✓ 1/9/87	1430	Flammable Solids	VT0015788	" " " " " "
✓ 4/16/87	110	" "	VT016408	" " " " " "
✓ 4/16/87	990	" "	VT016408	" " " " " "
✓ 9/7/87	550	" "	VT0050544	ETG AND ALLEN BEECHER FALLS
✓ 1/7/87	385	" "	VT0010544	" " " " " "
✓ 6/8/87	825	" "	VT0010544	" " " " " "
✓ 10/6/87	275	" "	VT0010545	" " " " " "
✓ 10/8/87	440	" "	VT0010545	" " " " " "
✓ 4/1/87	440	" "	VT0010548	" " " " " "
✓ 4/1/87	330	" "	VT0010548	" " " " " "



VERMONT AGENCY OF ENVIRONMENTAL CONSERVATION
 HAZARDOUS WASTE MANAGEMENT PROGRAM
 West Building, 103 South Main Street
 Waterbury, Vermont 05676
 (802)244-8702

Please print or type Form designed for use on elite (12-pitch) typewriter Form Approved OMB No. 2050-0029 Expires 9-30-88

In the absence of a copy of this form, the Vermont Department of Public Safety 1-800-641-5000

Copy 5: Transporter 1

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. VT 001 988 007 3 0 8 0 8 0 0 0 0 0 1	Manifest Document No. 0 0 0 0 0 0 0 1	Page 1 of 1	Information in the shaded areas is not required by Federal law.
Generator's Name and Mailing Address State of Vermont-Agency of Transportation 133 State St. Montpelier, VT 05602			A. State Manifest Document Number VT 0022236		B. State Generator's ID Central Garage Barre-Montpelier Rd., Barre, VT
Generator's Phone No. (802) 828-2564			C. State Transporter's ID		
Transporter 1 Company Name S.W. Laboratories, Inc.		6. US EPA ID Number VT 001 831 1 7 9 9 4 5		D. Transporter's Phone 207-772-3689	
Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID	
Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lacy Lane, Southington, CT 06489		10. US EPA ID Number CT 001 009 7 1 7 6 0 4		G. State Facility's ID	
				H. Facility's Phone 203-621-8383	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers		13. Total Quantity
			No.	Type	Unit Wt./Vol.
a. 10 Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993 (EPA Ignitability)			0101	D	0 0 5 0 0
10 Waste Flammable Solid, n.o.s. Flammable Solid UN1993 (EPA Ignitability)			0103	D	0 0 2 5 0
10 Waste Flammable Solid, n.o.s. Flammable Solid UN1993 (EPA Ignitability)			0103	D	0 0 4 0 0
10 Waste Flammable Solid, n.o.s. Flammable Solid UN1993 (EPA Ignitability)			0103	D	0 0 4 0 0
K. Handling Codes for Wastes Listed Above			a.		c.
Additional Information			b.		d.
<p>I, the undersigned, hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, hazard class, and ID number, and are in all respects in proper condition for transport in highway, air, rail, inland waterway, and national government regulations, and all applicable State law and regulations.</p> <p>If I am a transporter, I have a program in place to reduce the volume and toxicity of waste generated to the degree practicable, and I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the potential for harm to the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize the waste generated and I have selected the method that is available to me and that I can afford.</p>					
Signature			Signature		Month Day Year
Signature			Signature		Month Day Year
Signature			Signature		Month Day Year
Signature					
Signature					

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST PROGRAM, State Office Building
Hartford, CT 06106

FOR STATE USE ONLY

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. VT-P-0000001870000000	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State law.	
Generator's Name and Mailing Address State of Vermont Agency of Transportation 133 State St., Montpelier, VT 05602				A. State Manifest Document Number CT C 0208648		
4. Generator's Phone (802) 828-2087				B. State Code (EPCRA Address) District No. 5873		
5. Transporter 1 Company Name C.M. Laboratories, Inc.		6. US EPA ID Number ME D 083179945		C. State Code ME E33171		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Tran. Phone (802) 712-3689		
9. Designated Facility Name and Site Address Solvents Recovery Service of New England, Inc. Lozy Lane, Southington, CT 06489		10. US EPA ID Number CT D 099717604		E. State Code		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No.	13. Total Quantity	14. Unit Wt./Vol. Waste No.
a. Hazardous Waste Solid, n.o.s. CM-E NA 9189				047 PM	11700	P NONE
Additional Descriptions for Materials Listed Above. tar cutback 50# sand, soil 50#				K. Handling Codes for Wastes Listed Above		
c.				a.		
d.				b.		
15. Handling Instructions and Additional Information UN 117180-10						
<p>GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway, air, rail, water, or other mode of transport, in accordance with applicable international and national government regulations, and all applicable State laws and regulations.</p> <p>I, the undersigned, generator, 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 practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and potential adverse effects on 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 by using the best waste management method that is available to me and that I can afford.</p>						
Signature: <i>Kevin E. Duran Sr</i>				Month: 09	Day: 11	Year: 583
Transporter Acknowledgment of Receipt of Materials						
Printed Typed Name: Kevin E. Duran Sr				Signature: <i>Kevin E. Duran Sr</i>	Month: 09	Day: 11
Operator Acknowledgment of Receipt of Materials						
Printed Typed Name				Signature	Month	Day
Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19						
Printed Typed Name				Signature	Month	Day

COPY 5

CT C 0208648

SRS SITE DE MINIMIS SETTLEMENT COMMITTEE
c/o CBIA - Environmental Policies Council'
370 Asylum Street
Hartford, Connecticut 06103

August 6, 1992

TO: ALL DE MINIMIS POTENTIALLY RESPONSIBLE PARTIES (PRPs)
AT THE SOLVENTS RECOVERY SERVICE SUPERFUND SITE

FROM: SRS SITE DE MINIMIS SETTLEMENT COMMITTEE

SUBJECT: INVITATION TO JOIN A COMMITTEE THAT WILL BE
WORKING EXCLUSIVELY FOR THE DE MINIMIS PARTIES

MEETING: AUGUST 26, 1992, CBIA, HARTFORD, CT

No one likes being involved in a Superfund site. No one believes it is fair. Participation is especially disheartening for those companies that sent small volumes of wastes to the site but may have transaction costs alone that eclipse their potential share of the cleanup costs. These costs can become especially onerous for small quantity generators who may be asked to share the costs of technical consultants and legal counsel retained to protect the interests of the larger generators. Many of these issues and related costs are of no concern to small quantity generators who simply want a speedy and cost-effective solution. It is in the best interests of *all* small volume generators to keep transaction costs as low as possible while negotiating an early settlement with EPA and with the large quantity generators.

A number of small quantity generators have formed the SRS Site De Minimis Settlement Committee to focus exclusively on the issues related to *de minimis* parties. We have taken the position that all companies identified on EPA's Attachment C as having less than 0.5 percent of the volume at the SRS Site will be invited to join our committee. The group's *sole* interest will be to negotiate a fair and equitable settlement for group members as quickly as possible.

As in the case of many other Superfund sites, this *de minimis* group will have the primary aim of negotiating an early settlement with EPA and with the larger generators at the Site. At the SRS Site there is also the possibility of a *de micromis* settlement for generators who contributed an extremely small amount of waste to the site. It is our intent to obtain a settlement for the *de micromis* parties at the earliest possible date.

In addition to working for an early "cash out," our settlement group will coordinate mailings and information exchange between EPA and group members, establish a bank trust account, and conduct any other administrative tasks assigned to it by the group's members.

* In order to help reduce transaction costs for the *de minimis* PRPs, the Environmental Policies Council of the Connecticut Business and Industry Association (CBIA) has offered to provide administrative support to the Committee, making its offices available as a mailing address and for group meetings. CBIA does not intend to assume a larger role in the SRS settlement process, and by making its offices available, CBIA should not be construed as taking a position with respect to the Committee's activities.

No single company can be expected to undertake the expenses required to administer this group, and no single company will be able to negotiate effectively with EPA or with the larger group of PRPs. However, as a united group we can leverage our costs and focus our negotiations on an early settlement for group members. Therefore, to raise the *initial* funds for this effort, we are asking participants of the *de minimis* group to:

1. Fill out and return the enclosed form;
2. Using the table set forth below, enclose a check for the amount which applies to your company. **PLEASE MAKE THE CHECK PAYABLE TO "SRS Site De Minimis Settlement Committee"**;

INITIAL ADMINISTRATIVE ASSESSMENT

<u>Volume as Shown in the EPA's Enclosure C</u>	<u>Assessment</u>
above 100,000 gallons	\$500
100,000 to 10,000 gallons	\$250
less than 10,000 gallons	\$100

3. Mail the form and check to SRS SITE DE MINIMIS SETTLEMENT COMMITTEE, c/o CBIA - Environmental Policies Council, 370 Asylum Street, Hartford, Connecticut 06103.

As you can see, we have tiered the initial administrative assessment based upon the EPA's statement of the volume of waste sent to the Site by each company. We acknowledge that many companies may dispute the allocation given to them by EPA, but this is the simplest means we currently have to begin to organize a committee that can discuss settlement and allocation issues. Any small volume generator will be welcome to join the group at any time. However, latecomers will have to pay their share of any past assessments.

This administrative assessment will be used to cover mailings, faxes, photocopying, and the legal and other costs of negotiations with the EPA or the larger volume PRPs. We do not intend to retain any technical or engineering consultants. Additional assessments may be requested from group members depending upon the size of the group and the length and difficulty of negotiations. We are, however, committed to controlling and minimizing as much of the transactional costs as possible.

The SRS Site De Minimis Settlement Committee has scheduled an informational meeting for Wednesday, August 26, 1992 at CBIA's Hartford office (1st floor conference center) at 370 Asylum Street from 10:00 a.m. to noon. Many of your questions can be answered at that time.

The following attorneys, all representing companies who are members of the committee, have agreed to assist in answering questions and otherwise providing information to *de minimis* parties at no cost. If you plan on attending this meeting, or wish to obtain some additional information about the group, please feel free to call any of the attorneys listed below:

**Beginning Letter of Your
Company's First Name**

Please Call

A-C	Thomas Armstrong Shipman & Goodwin (203) 251-5812 <u>722-1475</u>
D-F	Douglas Cohen Brown, Rudnick, Freed & Gesmer (203) 525-8008
G-L	Thomas F. Harrison ✓ Day, Berry & Howard (203) 275-0480 John Bashaw Day, Berry & Howard (203) 275-0161
M-O	Paul Jacobi Jacobi, Kappel & Case (203) 874-7110
P-S	Kevin Murphy Pullman & Comley (203) 330-2202
T-Z	William Spencer Cohen & Channin (203) 549-6070 Tegan Blackburn Cohen & Channin (203) 549-6070

As a final note, we emphasize that we are not in any way trying to thwart the efforts of the other PRPs at this site. Rather, we believe that all parties can benefit from a quick resolution of the *de minimis* issue. We will work with the larger volume PRPs where we have common interests, and we intend to request a seat on the Steering Committee for the larger volume PRPs to facilitate communication between the groups.

We look forward to hearing from you.

Very truly yours,

**SRS SITE DE MINIMIS
SETTLEMENT COMMITTEE**

P.S. Some of you may have received an inquiry from Cohen & Channin or Pullman & Comley about joining a *de minimis* group. Please be advised that the companies represented by these firms are part of our group, and if you have already responded to those inquiries you do not need to return the enclosed form (but, we do need the check).

Form 89F 5/93	United States Bankruptcy Court FOR THE DISTRICT OF DELAWARE Case Number: 93-582 through 93-583	NOTICE OF COMMENCEMENT OF CASE UNDER CHAPTER 11 OF THE BANKRUPTCY CODE MEETING OF CREDITORS, AND FIXING OF DATES (CORPORATION/PARTNERSHIP CASE)	
In re (Name of Debtor) AM International, Inc. Addressograph Multigraph Corporation		Address of Debtor: 1800 W. Central Mount Prospect, IL 60056-2293	Tax ID Nos. 34-0054940 34-1114547
Addressee:		Date Filed: May 17, 1993	
Name, Telephone and Address of Attorneys for Debtor Mr. James L. Patton, Jr. Mr Richard D. Feintuch Young, Conaway, Stargatt & Taylor Wachtell, Lipton, Rosen & Katz Rodney Square North, 11th floor 299 Park Avenue PO Box 391 New York, NY 10171 Wilmington, Delaware 19899 (212) 371-9200 (302) 571-6600		Address of the Clerk of the Bankruptcy Court: 844 King Street, Lockbox #38, Room 6007 Wilmington, DE 19801	
		Name and Address of Trustee	Telephone
(X) Corporation () Partnership			
FILING CLAIMS If the court sets a deadline for filing a proof of claim, you will be notified.			
DATE, TIME, AND LOCATION OF MEETING OF CREDITORS June 25, 1993, 11:00 A.M., New Castle Room, Hotel DuPont 11th & Market Streets, Wilmington, Delaware 19801			
<p>COMMENCEMENT OF CASE. A petition for reorganization under chapter 11 of the Bankruptcy Code has been filed in this court by or against the debtor named above, and an order for relief has been entered. You will not receive notice of all documents filed in this case. All documents filed with the court, including lists of the debtor's property and debts, are available for inspection at the office of the clerk of the bankruptcy court.</p> <p>CREDITORS MAY NOT TAKE CERTAIN ACTIONS. A creditor is anyone to whom the debtor owes money or property. Under the Bankruptcy Code, the debtor is granted certain protection against creditors. Common examples of prohibited actions by creditors are contacting the debtor to demand repayment, taking action against the debtor to collect money owed to creditors or to take property of the debtor and starting or continuing foreclosure actions or repossessions. If unauthorized actions are taken by a creditor against a debtor, the court may penalize that creditor. A creditor who is considering taking action against the debtor or the property of the debtor should review §362 of the Bankruptcy Code and may wish to seek legal advice. If the debtor is a partnership, remedies otherwise available against general partners are not necessarily affected by the filing of this partnership case. The staff of the clerk of the bankruptcy court is not permitted to give legal advice.</p> <p>MEETING OF THE CREDITORS. The debtor's representative, as specified in Bankruptcy Rule 9001(5), is required to appear at the meeting of creditors on the date and at the place set forth above for the purpose of being examined under oath. Attendance by creditors at the meeting is welcomed, but not required. At the meeting, the creditors may examine the debtor and transact such other business as may properly come before the meeting. The meeting may be continued or adjourned from time to time by notice at the meeting, without further written notice to the creditors.</p> <p>PROOF OF CLAIM. Schedules of creditors have been or will be filed pursuant to Bankruptcy Rule 1007. Any creditor holding a scheduled claim which is not listed as disputed, contingent, or unliquidated as to amount may, but is not required to, file a proof of claim in this case. Creditors whose claims are not scheduled or whose claims are listed as disputed, contingent, or unliquidated as to amount and who desire to participate in the case or share in any distribution must file their proofs of claim. A creditor who desires to rely on the schedule of creditors has the responsibility for determining that the claim is listed accurately. The place to file a proof of claim by mail is Shawmut Bank Connecticut, Corporate Trust Operations, Claims Processing Unit, 777 Main St., MSN 224, Hartford CT. 06115. Proof of claim forms are available in the clerk's office of any bankruptcy court.</p> <p>PURPOSE OF CHAPTER 11 FILING. Chapter 11 of the Bankruptcy Code enables a debtor to reorganize pursuant to a plan. A plan is not effective unless approved by the court at a confirmation hearing. Creditors will be given notice concerning any plan, or in the event the case is dismissed or converted to another chapter of the Bankruptcy Code. The debtor will remain in possession of its property and will continue to operate any business unless a trustee is appointed.</p> <p style="text-align: center;">Dated May 24, 1993 Wilmington, Delaware</p> <p style="text-align: right;">/s/James L. Patton, Jr. Young, Conaway, Stargatt & Taylor Rodney Square North, 11th floor PO Box 391 Wilmington, Delaware 19899 Counsel to AM International, Inc. et al.</p>			