

REPORT

NCR

Millsboro, Delaware

Hazardous Waste Investigation



Betz·Converse·Murdoch·Inc.
Consulting Engineers, Planners and Scientists

AR100001

HAZARDOUS WASTE INVESTIGATION

FOR

NCR CORPORATION
MILLSBORO, DELAWARE

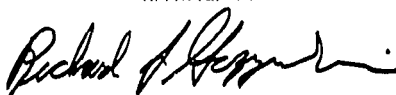
OCTOBER 1981

BCM PROJECT NO. 00-4529-05

PREPARED BY


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TECHNICAL CONSULTANT

APPROVED BY


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ASSISTANT VICE PRESIDENT

BETZ-CONVERSE-MURDOCH-INC.
ONE PLYMOUTH MEETING MALL
PLYMOUTH MEETING, PENNSYLVANIA 19462

AR100002

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1.0 INTRODUCTION

This report presents the results of a study conducted by Betz-Converse-Murdoch-Inc. (BCM) to investigate hazardous waste management practices at the NCR Corporation plant in Millsboro, Delaware. The purpose of the study was to investigate past hazardous waste management practices to determine if hazardous wastes had previously been disposed of on the plant site. This information is required by the purchaser prior to the sale of the facility. The NCR Corporation Millsboro plant is located just to the south of Millsboro on Mitchell Street off of U.S. Route 113. The plant is now being closed and the manufacturing operations are being relocated in a new plant in South Carolina. A current plan of the site and plant is shown in Figure 1. The overall site is approximately 60 acres.

2.0 HISTORY OF PLANT AND SITE

2.1 Previous Ownership

Prior to 1965, the current plant site was occupied only by one or more residential dwellings situated close to Mitchell Street. In 1965, Dennis Mitchell, Inc. constructed the current plant for the purpose of manufacturing children's furniture. Because of financial difficulties, production never began.

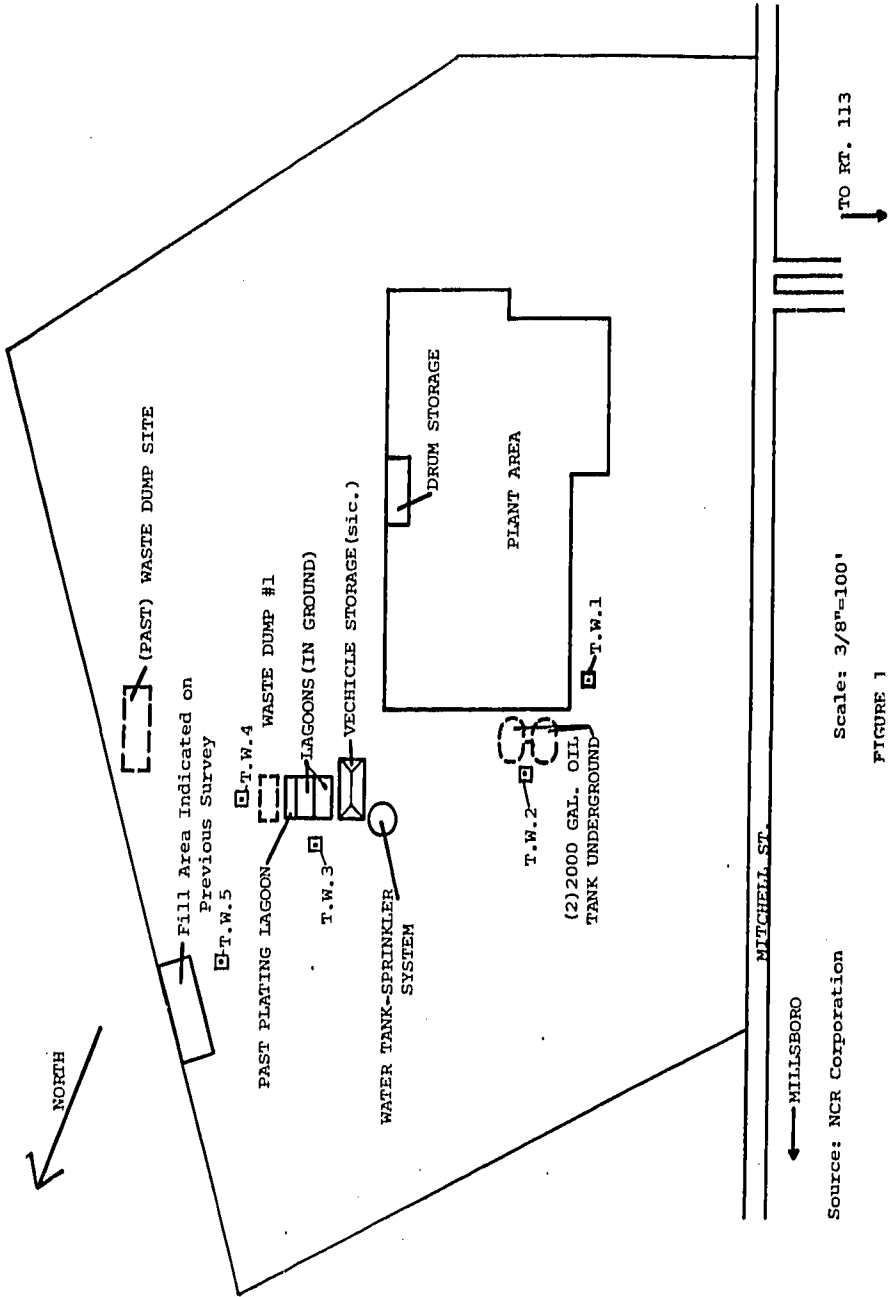
2.2 Current Ownership

NCR Corporation (formerly the National Cash Register Company) purchased the vacant facility in 1967. Since 1967, the plant has been used to manufacture cash registers and similar electronic calculating equipment.

3.0 WASTE MANAGEMENT HISTORY

3.1 Interviews with Current and Past Managers

For the purpose of determining past hazardous waste management practices, BCM and NCR conducted an interview and records review program. BCM interviewed the current plant engineer, Mr. Richard Calhoun, and Mr. Larry Shaffer, Plant Environmental Coordinator. Mr. Shaffer and Mr. Calhoun know about plant operations back as far as 1968 and 1974, respectively. To determine waste management practices prior to 1968, Mr. Calhoun contacted Mr. Charles Stuchlik III, who held the position of Plant Engineer from the time NCR purchased the plant until Mr. Calhoun became Plant Engineer.



Source: NCR Corporation
Scale: 3/8"=100'
FIGURE 1

Mr. Stuchlik prepared a memorandum describing past waste management practices; it is included as Appendix 1. The waste management practices discussed in the following sections are based on these interviews.

3.2 Industrial Waste Treatment

The on-site industrial waste Treatment Plant was used from 1967 until late 1978 or early 1979 for treating plating wastes. Modifications to the plant were made in 1973 and 1974. In the early years of Treatment Plant operation, wastes were disposed of on-site in a lagoon located near the Treatment Plant. This lagoon was later removed and its contents, along with Treatment Plant cleanout sludges, were disposed of in an unlined pit identified as "(PAST) WASTE DUMP SITE" on Figure 1. These wastes were dumped into a prepared excavation, along with miscellaneous construction and demolition rubble, and then covered.

The Treatment Plant currently consists of three concrete lagoons which were used to treat plating waste and cooling water prior to late 1978 or early 1979, when plating wastes were no longer generated. Since 1979, the Treatment Plant has been used solely for treating cooling water.

One additional "DRUM STORAGE" area has been identified in the interior of the plant. At this location also, drainage is conveyed to the Treatment Plant. Because of the impending plant closure, NCR has applied to the regulatory agencies for termination of its Treatment Plant discharge permit. When termination is authorized, the plant discharge line will be capped.

3.3 On-Site Disposal and Disposal Locations Identified on Plans

Based on a review of plans and records by Mr. Richard Calhoun, Plant Engineer, the following potential on-site waste disposal locations were identified:

- "(PAST) WASTE DUMP SITE" - As previously discussed, this area near the center of the rear property line was used to dispose of plating waste sludges and miscellaneous demolition and construction wastes in the late 1960s. Recent exploratory excavations have confirmed the presence of this disposal area, which is the subject of current excavation and removal activities. This site will be discussed further in Section 4.
- Figure 1 also shows an area identified on a previous site survey; this site was drawn by approximate location on Figure 1 by BCM. This area was apparently used to dispose of miscellaneous demolition and construction wastes, which were

removed within the last year. There are still a few pieces of broken masonry materials in this area. To confirm the lack of any other waste materials in this area, NCR constructed an exploratory excavation trench through the approximate center of the waste disposal location shown on the previous survey. BCM inspected the open trench and has concluded that there is no visual evidence of remaining subsurface wastes at the trench location.

- "WASTE DUMP NO. 1" in Figure 1 is a potential disposal location just to the northeast of the Treatment Plant. This area and another adjacent site near "TWA" were shown in plans by Betz Environmental Engineers, Inc. (BEE), (now Betz-Converse-Murdoch-Inc. (BCM)), dated November 2, 1973 (Project No. 4529-03, Plan No. 101). A copy of this plan is included as Appendix 2. NCR apparently contracted with BEE for conceptual work related to the upgrading of the waste treatment system, including establishing a lined sludge landfill. There is no evidence that any of these improvements were constructed, and BCM has no records which indicate that plans were prepared past the preliminary stage. As far as can be determined, BEE prepared preliminary plans for submission to the state government. The preliminary plans were subsequently approved, but NCR apparently opted for off-site hauling of the wastes, rather than on-site upgraded treatment and disposal. A recent NCR exploratory trench excavation through the center of the location shown on the plan was inspected by BCM personnel; there is no visual evidence of remaining subsurface wastes.
- The adjacent potential disposal area identified as "EXIST. LANDFILL (BACKFILLED)" on Plan No. 101 was also the subject of an exploratory trench excavation. BCM personnel inspected this excavation (now near Test Well No. 4); there is no visual evidence of remaining subsurface wastes.

3.4 Off-Site Disposal

The majority of hazardous wastes generated at the NCR plant were managed through off-site disposal. Wastes which fall into this category are:

- Plating wastewaters
- Plating waste sludges
- Production chemicals and wastes
- Maintenance chemicals and wastes

NCR records indicate that wastes were hauled from the site by the following companies:

American Recovery
Rollins Environmental Service
Robinson Chemical
Chem Clear

4.0 RCRA COMPLIANCE

4.1 Closure Plan

Under the federal Resource Conservation and Recovery Act (RCRA), regulations have been promulgated for hazardous waste management. Briefly, the regulations issued to date have required the disclosure of hazardous waste management practices for on-site processing or disposal facilities, and the preparation of a closure plan for eventual closure of any facility. NCR has complied with these regulations and has submitted a closure plan to the Delaware Department of Natural Resources and Environmental Control (DNREC), Division of Environmental Control, Water Resources Section. This state agency has assumed enforcement powers under the RCRA.

In response to NCR's submitted closure plan, the DNREC issued a letter on September 1, 1981 specifying certain requirements for closure plan implementation (see Appendix 3). NCR is now taking the following action to comply with these requirements:

1. Under the Hazardous Waste Management Program:
 - a. Drums in the interior drum storage area have been disposed of; manifest information can be found in Appendix 4.
 - b. The interior drum storage area has been scraped, swept, and washed twice to comply with decontamination requirements.
 - c. The Treatment Plant lagoon structures have been decontaminated and the wastes were removed from the site by Clean America; manifest information can be found in Appendix 5. Lagoons No. 1 and No. 2 were cleaned using high pressure detergent on all exposed surfaces. The plating lagoon (No. 3) was scraped, rinsed, and squeegeed.

2. Under requirements for the old waste disposal pit ("(PAST) WASTE DUMP SITE"):
 - a. A scaled map has been prepared showing the location of the disposal site, monitor wells, and production wells (see Appendix 6).
 - b. Top of casing elevations for test wells are also shown on the map (Appendix 6).
 - c. The waste disposal site was closed on September 21, 1981. A BCM inspector was present during excavation and removal operations. Field logs are shown in Appendix 7. All waste materials were excavated, along with two feet of soil below the wastes. Excavated materials have been removed from the site and the area was back-filled. Manifest information can be found in Appendix 8.
3. NCR is negotiating the monitoring requirements (1-4) with the DNREC.

As stipulated in the September 1 letter from the DNREC, a RCRA Closure Plan with Engineer's Certification has been prepared and submitted to the DNREC.

4.2 Plant Inspection

BCM personnel inspected the NCR plant and site on September 8, 1981 with NCR representatives to identify, on an interim basis, those items requiring additional attention. As of September 8, 1981, the following wastes had been removed:

- Treatment Plant lagoon contents
- Waste salts from solid waveflow machine
- Miscellaneous laboratory chemicals

The Maintenance Department had prepared a list of miscellaneous maintenance chemicals and wastes which required removal. This list is attached as Appendix 9.

BCM completed a final inspection of the plant on September 28, 1981. As of that date, all remaining wastes had been removed. Manifest information for all other wastes removed, including maintenance chemicals and wastes, is shown in Appendix 10.

4.3 Groundwater Monitoring Data

Groundwater monitoring wells have been installed at the NCR plant to determine the potential presence of plating waste constituents in the groundwater. Recent monitoring well sample laboratory analyses are shown in Appendix 11.

~~A review of the data indicates some evidence of groundwater contamination in the area of Test Well No. 4, particularly high levels of chromium. The most recent data (August 26, 1981) show a level of 0.15 mg/l, which is approximately three times the federal drinking water standard of 0.05 mg/l. It is likely that these readings are a result of past plating waste treatment activities.~~

~~The remaining test wells show no significant contamination. The total area or volume of contaminated groundwater is unknown, but contamination in this area in such low concentrations would not be unexpected, given the length of time that treatment activities were continued at this location. The contamination at this location does not appear to be widespread, based on the results from the other monitoring wells.~~

4.4 Soil Testing

In order to ascertain that no residual contamination existed following excavation and removal of wastes at the "(PAST) WASTE DUMP SITE," samples of soils were obtained from the bottom of the excavation (below the previous waste location). In addition, a background (surface) sample was obtained from the same area. The samples were subjected to a standard leaching test and the leachate was then analyzed to determine if any plating waste contaminants were present. Laboratory test results are shown in Appendix 12. A review of the test results shows that all constituents tested are the same in background and excavation samples. Thus, no residual contaminated soils problem appears to exist.

5.0 CONCLUSIONS

NCR Corporation has undertaken a comprehensive program to remove any residual hazardous waste materials from the plant and surrounding site at its Millsboro facility. BCM has assisted NCR in complying with the RCRA Closure Plan regulations and in completing a review of past waste hazardous waste management practices which could potentially result in future problems. Hazardous waste management at this plant involved treatment and discharge or off-site disposal, with only a relatively small quantity of plating waste sludge being disposed of on-site. Based on the information made available to BCM during its study, and an inspection conducted by BCM

personnel, this waste, along with remaining waste chemicals from production and maintenance activities, have now been removed from the site in accordance with current state and federal regulations.

NCR representatives have indicated that the drain lines between the plant and lagoons have been flushed thoroughly. While the interiors of the collection pipes were not observed, there was no evidence of residual material at the pipe discharge points in the lagoons. Because the area within the plant that drained to these pipes has been decontaminated, no contaminants should enter these pipes.

Minor contamination of groundwater in the area of the Treatment Plant has been identified. Chromium has been found in two samples taken six months apart from a monitoring well (Test Well No. 4) at concentrations of approximately three to four times the current federal drinking water standards. This contamination may dissipate over time as a result of the plant being decontaminated and the wastes excavated. BCM recommends continued monitoring of the affected well and the plant supply wells (if a new owner continues to use them).

In summary, based on the information supplied to BCM, all hazardous wastes have now been removed from the site in accordance with current state and federal regulations. The majority of hazardous wastes generated at this site were managed either through off-site disposal or through the Treatment Plant. The only wastes found to be disposed of on-site have been removed, and closure requirements as specified by the DNREC have been complied with.

Betz • Converse • Murdoch • Inc.

APPENDIX 1

MEMO FROM MR. CHARLES STUHLIK III,
FORMER NCR PLANT ENGINEER

ARI00012

Solar Heating, Inc.

Route 1 - Box 304B



(302) 856-3922 (302) 684-8007

Milton, Delaware 19968

September 22, 1981

To Whom It May Concern:

I, Charles F. Stuchlik III, was employed by H.C.R. as their Plant Engineer. During my employment, we used an area located next to the railroad in the back far left of the building for the purpose of dumping chemical liquids that were contaminated.

This was the only site used and no large dumping was done. If there are further questions, please advise.

Respectfully Submitted,

Charles F. Stuchlik III

1967 - 1971

ART00013

Betz • Converse • Murdoch • Inc.

APPENDIX 2

BETZ • CONVERSE • MURDOCH • INC. PLAN NO. 101

AR100014

EPA REGION III
SUPERFUND DOCUMENT MANAGEMENT SYSTEM

DOC ID 152615
PAGE # AR 10015

IMAGERY COVER SHEET
UNSCANNABLE ITEM

SITE NAME	<u>NCR Millsboro</u>
OPERABLE UNIT	<u>00</u>
ADMINISTRATIVE RECORDS- SECTION	<u>1</u> VOLUME

REPORT OR DOCUMENT TITLE	<u>Hazardous Waste</u> <u>Investigation</u>
DATE OF DOCUMENT	<u>10/1/81</u>
DESCRIPTION OF IMAGERY	<u>aerial view map</u>
NUMBER AND TYPE OF IMAGERY ITEM(S)	<u>1, Oversized Map</u>

Betz • Converse • Murdoch • Inc.

APPENDIX 3

LETTER FROM DELAWARE DNREC DATED SEPTEMBER 1, 1981

AR100016



STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
& ENVIRONMENTAL CONTROL
DIVISION OF ENVIRONMENTAL CONTROL
WATER RESOURCES SECTION
EDWARD TATNALL BUILDING
P.O. BOX 1401
DOVER, DELAWARE 19901

TELEPHONE (302) 678-4761

September 1, 1981

Mr. Richard Calhoun
NCR Corporation
P. O. Box 607
Millsboro, DE 19966

Dear Mr. Calhoun:

This is in regard to the closure of your facility at Millsboro, Delaware.

Based on the Department's inspection conducted on August 10, 1981, under the Hazardous Waste Management Program, we found some technical violations of the State of Delaware Regulations Governing Hazardous Wastes. The closure plan by NCR to the Department on August 13, 1981, shows the steps the Company is presently undertaking to clean up the facility in a satisfactory manner. In general, this plan is acceptable to the Department. Also, in view of the nature of the technical violations and the clean up operations presently in progress, we do not contemplate any actions with respect to the technical violations.

However, to complete the closure of the facility under the Hazardous Waste Management Program, we require the following activities to be completed.

- 1) The drums, containing hazardous wastes, shall be removed from the storage area for disposal by adequately completing the manifest requirements of our hazardous waste regulations. Specifically, you shall make certain that all the relevant Part A's of the manifest forms from your Company and the corresponding Part B's from the disposal facility are sent to the Department as soon as possible.
- 2) You shall make sure that the storage area is adequately decontaminated after the drums have been shipped out.
- 3) You shall also provide a detailed description of the procedures undertaken to decontaminate the lagoons, that originally contained wastes from your electroplating operations. Such description should also include the names of the contractual services you may have used for the clean-up and subsequent disposal operations.

Regarding the old waste disposal pit, in order to complete our review, we require the following:

- 1) A scaled map accurately showing the location of the disposal site (or sites) and the location of the monitor wells and production wells;

AR100017

NCR Corporation
September 1, 1981
Page Two

2) The top-of-casing elevations of the monitor well locations surveyed to a common datum;

3) The date of closure of the old waste disposal site or sites.

Also, at this time, the following requirements must be initiated:

1) Depth-to-water measurements of monitor wells #1, 2, 3, 4 and 5, on a quarterly basis;

2) Analysis for the following parameters for samples from monitor wells #1, 2, 3, 4 and 5; chemical oxygen demand (COD), specific conductance, pH, chloride, total dissolved solids (TDS), iron, manganese and nitrate-nitrogen. These analysis will be done on a quarterly basis;

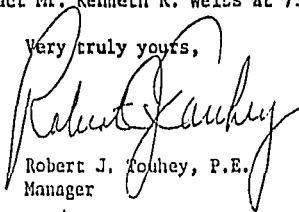
3) The following analysis will be run once per year (in March or April) on samples from monitor wells #1, 2, 3, 4 and 5 - chromium, lead and mercury.

4) The data obtained in accordance with above conditions 1) and 2) should be submitted to the Department on a quarterly basis, and the data obtained in accordance with condition 3) should be submitted to Department on an annual basis. All data must be submitted within 30 days of the date of collection of samples.

These monitoring requirements should be implemented for at least five (5) years after initiation.

We look forward to your complete submittal of the above information to complete the closure package for your operations at Millsboro. If we can provide any further assistance, please contact Mr. Kenneth R. Weiss at 736-4781.

Very truly yours,



Robert J. Touhey, P.E.
Manager

RJT:KRW:jw

cc Mr. Thomas P. Eichler
Mr. Kenneth R. Weiss
Mr. Jay N. Motwani
Ms. Lisa A. Hamilton
Ms. Dorothy Sbriglia

AR100018

DNREC
SOLID WASTE MGT. BRANCH
P.O. BOX 1401
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
USING A BALL POINT PEN.

PART A

DOCUMENT NO. DE-A- 15636

GENERATOR NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
JR ESM-Millsboro	P.O. Box 607 Mitchell Rd. Millsboro, DE	19966 302-934-8111	DE D 0 4 3 9 5 8 3 8 8
TRANSPORTER NO. 1 D.M. Bowman, Inc.	Box 43A1 Williamsport, MD 21795	301-223-6900	MD D 0 2 2 6 0 4 4 2 5
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY American Recovery	P.O. Box 6553 Baltimore, MD 21219	301-388-0837	MD D 0 7 4 9 2 3 3 9 2

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS		GALLONS	CU YDS	POUNDS			
1	waste flux	corrosive	UA 0705		X		2360	X			52 DR	T F 0 0 1	
2													
3													

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.E., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Lawrence S. Bowman</i>	TITLE <i>DEPT</i>	DATE TO BE SHIPPED 9-2-81	EXPECTED ARRIVAL DATE MONTH 9 DAY 2 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Carl A. Spivey</i>	TRAILER LICENSE PLATE NO. STATE <i>MD</i> NUMBER <i>2A5877</i>	DATE RECEIVED MONTH 9 DAY 2 YEAR 81	

DISPOSER STATE - MAILED BY GENERATOR

copy 1 and copy 2 to the
retains Part A of copy 3 for

retains the remaining copies of
the shipment.

shipment to the Designated
orter No. 2, Transporter No.
elivery of the shipment, ob-
d certification of the TSD
epresentative or Transporter
d retains copy 5 of the

shipment to the Designated
ter No. 2 signs and certifies
nt, obtains the signature and
D Facility's authorized rep-
es and retains copy 6 of the

transporters. If more than two transporters are to be utilized, the Generator must complete an additional manifest form(s) and reference the first manifest document number on the additional manifest form(s).

8. If more than four hazardous wastes from the same generator are to be shipped in the same shipment, additional manifests must be prepared by the generator.

9. Note the above instructions hold for Interstate and Intrastate shipments. If there are any questions or clarification regarding the instructions please contact the DNREC, Solid Waste Mgt. Branch, P.O. Box 1401, Ed. Tatnall Bldg., Dover, DE 19901 or call (302) 736-4781.

AR100019.

SOLID WASTE MGT. BRANCH
 200 BOX 1401
 DOVER, DE 19001

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

DOCUMENT NO. DE-A- **01116**

PART A

GENERATOR NAME CR EAM Millboro	SITE ADDRESS P. O. Box 607	PHONE NO. 302-936-8111	EPA I.D. NO. D E D 0 4 8 9 5 8 3 0 8
TRANSPORTER NO. 1 Clean America	TRANSPORTER ADDRESS 9407 Thornewood DR	TRANSPORTER PHONE NO. 301-668-7174	TRANSPORTER EPA I.D. NO. M D D 0 8 2 6 0 4 5 5 4
TREATMENT, STORAGE OR DISPOSAL FACILITY Clean America	FACILITY ADDRESS Baltimore, MD 1510 Russell St. Baltimore, MD	FACILITY PHONE NO. 301-685-3910	FACILITY EPA I.D. NO. M D T 0 0 0 6 6 7 5 8 7

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
 THIS FORM IS NO. **1** OUT OF A TOTAL OF **1** THE FIRST MANIFEST DOCUMENT NO. IS **00000000**

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS				CONTAINERS NO. TYPE	EPA HAZ. CODE	EPA WASTE TYPE	
				SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS	POUNDS				TONS
1	contaminated cooling						3500					1	TT	T	F 0 0 1
2	water waste flux	corrosive	HA 1906	X											
3															
4															

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED):

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Lawrence E. Hoffman</i>	TITLE IE III	DATE TO BE SHIPPED 7/27/81	EXPECTED ARRIVAL DATE MONTH 7 DAY 27 YEAR 1981
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>R. King</i>	TRAILER LICENSE PLATE NO. MD M18420	DATE RECEIVED MONTH 7 DAY 27 YEAR 1981	

GENERATOR STATE - MAILED BY GENERATOR

AR100020

GENERATOR - Information in this Green Section to be completed by Waste Originator - See Back of Form

MANIFEST DOCUMENT NO. **A 72713**

Generator EPA I.D. Number: **00000000000000**

Facility Name & Address: **Chlor-Alco Bilcocks, MD**

Shipment Date: **7-26-82**

Vehicle Certification Number: **00000000000000**

Facility EPA I.D. No. (Destination): **MDT000000000000**

Division of Waste: **0000**

Select and Enter One Code from Description Listed Below:

Solvents Grease Acid Cleaning Waste Water Oil Inorganic Liquid Organic Liquid Mixed Chemical Liquid Organic Solid Inorganic Solid Mixed Chemical Solid

Shipment Date: **7-26-82**

Generator EPA I.D. No.: **00000000000000**

Vehicle Certification Number: **00000000000000**

Facility EPA I.D. No. (Destination): **MDT000000000000**

Facility Name & Address: **Chlor-Alco Bilcocks, MD**

TYPE LOADS

LEAK SPILL DRUM TANKER TANKER (OVERHEAD) TANKER (UNDER) TANKER (UNDER) TANKER (UNDER) TANKER (UNDER)

ENTER APPLICABLE CODE

% BY WEIGHT MISCELLANEOUS

SHIPMENT NAME PROPER USE DOT	US DOT HAZARD CLASS	HAZARDOUS MATERIAL NUMBER	QUANTITY	UNITS	CONTAINERS	HAZ. MAT. CODE	EPA TYPE	CONCENTRATION
concentrated cooling water		151200	10	0	0	0	0	10
water flux	09							
TOTAL								

Driver Signature: _____ Date: _____

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type): _____ Signature of Agent: _____ Generator's Emergency Telephone Number: _____

HAULER - Information in this Pink Section to be completed by Waste Hauler - See Instructions on Back of Form

NO. **A 72713**

Company Name of Hauler: **Chlor-Alco**

Hauler EPA I.D. No.: **MDT000000000000**

Vehicle Certification Number: **00000000000000**

No. of Containers & Type: **00**

Date Material Accepted by Hauler: **7-26-82**

Date Material Delivered to Facility: **07 26 82**

Facility EPA I.D. No.: **MDT000000000000**

Facility Name (Destination): **Chlor-Alco Bilcocks, MD**

Generator EPA I.D. No.: **00000000000000**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Name(s) of Vehicle Driver (Print): _____ Driver Signature: _____

FACILITY - Information in this Section to be completed by Facility - See Instructions on Back of Form

NO. **A 72713**

Facility Name: _____ Date Hazardous Waste Received: _____

PART B GENERATOR - MAILED BY TSD FACILITY

TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT

TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT

TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT

TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS.

GENERATOR EPA I.D. NO. _____ EXPECTED DATE OF DISPOSAL OR TREATMENT: MONTH **07** DAY **27** YEAR **82**

TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE AND CERTIFICATION

DATE RECEIVED: MONTH **07** DAY **27** YEAR **82**

DATE RECEIVED: MONTH **07** DAY **27** YEAR **82**

IN case of an emergency or spill, immediately call the National Response Center (800) 424 8802 and the State (301) 834 4531

ARJ 00002 NP DE-A 011 3

SOLID WASTE MGT. BRANCH
 P.O. BOX 1401
 DOVER, DE 19903

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
 USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **01114**

PART A

GENERATOR NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
CR EAM Millsboro TRANSPORTER NO. 1	P O Box 607 Millsboro, DE 19966	302-334-8111	DE D 043958388
American Tank Truck TRANSPORTER NO. 2 (IF ANY)	Baltimore, MD	301-636-1616	MD D 089372746
TREATMENT, STORAGE OR DISPOSAL FACILITY Chem-Clear	1910 Russell St	301-687-3910	MD T 0006147537

IF MORE THAN ONE MANIFEST FORM IS USED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS		SLUDGE	GALLONS CU YDS	POUNDS			
1	contaminated cooling water waste flux	corrosive	UA 1906	X			5500	X			1 TT	T	F O D
2													
3													
4													

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE, WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	TITLE <i>T.E.H.</i>	DATE TO BE SHIPPED <i>7/25/81</i>	EXPECTED ARRIVAL DATE MONTH <i>7</i> DAY <i>27</i> YEAR <i>81</i>
TRANSPORTER NO. & SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. <i>MD 794132</i>	DATE RECEIVED	MONTH DAY YEAR

GENERATOR STATE - MAILED BY GENERATOR

AR100022

GENERATOR - Information in this Green Section to be completed by Waste Generator - See Back of Form
MANIFEST DOCUMENT NO. A 72712

Generator EPA I.D. Number: D E D O 4 3 9 5 A 3 A 4
 Generator Name: 1000007
 Address: 11111111111
 Phone No: 1111111111
 Ship Date: 07 25 91
 Trailer EPA I.D. No.: D E D O 4 3 9 5 A 3 A 4
 Vehicle Certification Number: 1 1 1 1 1 1 1 1
 Facility EPA I.D. No.: D E D O 4 3 9 5 A 3 A 4
 Facility Name & Address: Class Class No: 11111111

Description of Waste: LIQUID
 Select and Enter One Code from Description Listed Below:
 Solvent Organic Acid
 Cleaning Waste Water Oil Inorganic Liquid
 Organic Liquid Mixed Chemical Liquid Inorganic Sludge
 Organic Sludge Mixed Chemical Sludge Organic Solid
 Inorganic Solid Mixed Chemical Solid

WASTE DESCRIPTION: _____

TYPE CODES:
 BRUM LIQUID
 LIQUID SOLID
 TANK (over) TANK UNDER
 OTHER

ENTER APPLICABLE CODE:
 BY RESIDE MISPLACED

SHIPPING NAME PROPER US DOT	US DOT HAZARD CLASS	UN OR NA NUMBER	FORM	QUANTITY	UNIT	CONTAINERS	HAZ. CLASS	HAZ. CODE	HAZ. EFF.	CONCENTRATION
contaminated cooling water waste slud	corrosive	U A 1 X E	L	0	0	0	0	0	0	0
TOTAL										

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL AND OCCUPATIONAL SAFETY AND HEALTH PROGRAMS.

Name of Authorized Agent (Print or Type): _____ Signature of Agent: _____ Generator's Emergency Telephone Number: _____

HAULER - Information in this Pink Section to be completed by Waste Hauler - See Instructions on Back of Form
 NO. A 72712

Company Name of Hauler: American Truck Truck, Inc
 Hauler EPA I.D. No.: D E D O 4 3 9 5 A 3 A 4
 Vehicle Certification Number: 1 1 1 1 1 1 1 1
 No. of Containers & Type: 01
 Date Material Accepted by Hauler: 07 25 91

Date Material Delivered to Facility: 07 25 91
 Facility EPA I.D. No.: D E D O 4 3 9 5 A 3 A 4
 Facility Name & Site (Destination): Class Class No: 11111111
 Generator EPA I.D. No.: D E D O 4 3 9 5 A 3 A 4

HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Name(s) of Vehicle Driver (Print): _____ Driver Signature: _____

FACILITY - Information in this Section to be completed by Facility - See Instructions on Back of Form
 (DISPOSAL TREATMENT STORAGE) NO. A 72712

Facility Name & State: Class Class No: 11111111
 Date Hazardous Waste Received: 07 25 91

Generator - MAILED BY TSD FACILITY

TO BE FILLED OUT BY FACILITY	TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT		DATE DELIVERED	
	MONTH	DAY	MONTH	YEAR
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT	TRAILER LICENSE NO. & STATE	PLATE NO.	NUMBER	DATE RECEIVED
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	MONTH	DAY	MONTH	YEAR

TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS.	HANDLING METHOD	
	1	2

GENERATOR EPA I.D. NO.: D E D O 4 3 9 5 A 3 A 4
 EXPECTED DATE OF DISPOSAL OR TREATMENT: 07 25 91
 FACILITY SIGNATURE AND CERTIFICATION: _____ DATE RECEIVED: _____

In case of an emergency or spill, immediately call the local Response Center (800) 424-8802 and the State (301) 834-6331

DOCUMENT NO. DE-A 01114

SOLID WASTE MGT. BRANCH
P.O. BOX 1901
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEAR
USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **01112**

PART A

GENERATOR NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
GENERATOR			
VCR EAM Millboro	P O Box 607	302-934-8111	D D D O 4 1 0 5 9 3 0 0
TRANSPORTER NO. 1	Millboro, DE 19966		
American Tank Truck	6350 Ordinance Pt. Rd.	301-636-1616	M D D O 6 9 3 7 2 7 4 6
TRANSPORTER NO. 2 (IF ANY)	Baltimore, MD		
TREATMENT, STORAGE OR DISPOSAL FACILITY	1910 Russell St.	301-632-3910	M D D O 0 0 0 6 4 7 5 3 7
Chem-Clear	Baltimore, MD		

IF MORE THAN ONE MANIFEST IS USED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS				CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE	
				SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS	TONS				
1	contaminated cooling water waste flux	corrosive	HA 1906		x			5700					1	TT	T	F 0 0 1
2																
3																
4																

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.E., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James Shiff</i>	TITLE EATT	DATE TO BE SHIPPED 7/25/81	EXPECTED ARRIVAL DATE 7/25/81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Roger Johnson</i>	TRAILER LICENSE PLATE NO. STATE MD	NUMBER A944549	DATE RECEIVED 7 25 81

GENERATOR STATE -- MAILED BY GENERATOR

AR100024

GENERATOR - Information in the Green Section to be completed by Waste Originator - See Back of Form.

MANIFEST DOCUMENT NO. **A 72709**

Generator EPA I.D. No. **0 9 0 0 9 9 9 9 9 9 9 9**

Company Name **WILLIAMS**

Generator **P O Box 627**

Address **Hillside, MD 21054**

Phone No. **301-924-1111**

Shipment Date **0 7 2 5 6 1**

Hauler EPA I.D. No. **M D D 0 0 6 9 3 7 2 7 4 6**

Vehicle Certification Number **1 A 1 1**

Facility EPA I.D. No. **M D T 0 0 0 6 4 7 3 5 3 7**

Facility Name & Address **Chem-Clare Baltimore, MD**

Description of Waste **C L M**

Select and Enter One Code from Description Listed Below:

100 Solvents 101 Paints 102 Acids

103 Cleaning Waste Water 104 Oils 105 Inorganic Liquids

106 Organic Liquids 107 Organic Chemicals, if Liquid 108 Inorganic Solids

109 Organic Sludge 110 Mixed Chemical Sludge 111 Organic Solids

112 Inorganic Solids 113 Mixed Chemical Solids

WASTE DESCRIBED:

TYPE CODES

01 DRUM 02 CAN 03 BARS 04 TANKS

05 TANKS (EXCL.) 06 DUMPTERS (EXCL.) 07 TANK TENDERS 08 OTHER

UNITS APPLICABLE TO % OF WEIGHT

01 POUNDS 02 METRIC TONS

SHIPPING NAME	US DOT HAZARD CLASS	HAZARDOUS MATERIAL ID NUMBER	QUANTITY	UNIT	CONTAINERS	NO. OF TYPES	EPA WASTE TYPE	CONCENTRATION
Concentrated cooling water	3	149006	1	L	1	1	T 000	1.0
Waste flux	3							
			71.13	TOTAL				

Driver Signature *[Signature]* Date **07/25/61**

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type) **[Signature]** Agent's Signature

Year at this Performance **1961** Generator's Emergency Telephone Number **711**

HAULER - Information in the Pink Section to be completed by Waste Hauler - See Instructions on Back of Form.

Company Name of Hauler **AMERICAN TRUCK TRAILERS, INC.**

Hauler EPA I.D. No. **M D D 0 0 6 9 3 7 2 7 4 6**

Vehicle Certification Number **1 2 1 4 3**

No. of Containers or Type

TYPE CODES

01 DRUM 02 CAN 03 BARS 04 TANKS

05 TANKS (EXCL.) 06 DUMPTERS (EXCL.) 07 TANK TENDERS 08 OTHER

Date Material Accepted by Hauler **0 7 2 5 6 1**

Date Material Delivered to Facility **0 7 2 5 6 1**

Facility EPA I.D. No. **M D T 0 0 0 6 4 7 3 5 3 7**

Facility Name & State (Destination) **Chem-Clare Baltimore, MD**

Generator EPA I.D. No. **0 9 0 0 9 9 9 9 9 9 9 9**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Name(s) of Vehicle Driver (Print) **COOPER JOHNSON** Driver Signature *[Signature]*

FACILITY - Information in this Section to be completed by Facility - See Instructions on Back of Form (DISPOSAL TREATMENT STORAGE)

Facility Name **Chem-Clare** Date Hazardous Waste Received **0 7 2 5 6 1**

PART B GENERATOR - MAILED BY TSD FACILITY

TO BE FILLED OUT BY TRANSPORTER	TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
	TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT	DATE RECEIVED
	TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
TO BE FILLED OUT BY TSD FACILITY	THE ATMF AT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DEFECTS OR TWEAKS IN THIS MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS.	HANDLED BY METHOD
	CERTIFICATION EPA ID NO.	EXPECTED DATE OF DISPOSAL OR TREATMENT
	THE ATMF AT STORAGE OR DISPOSAL FACILITY SIGNATURE AND CERTIFICATION	DATE RECEIVED
	In case of an emergency of toxic, immediately call the Regional Response Center (800) 424-8802 and the State (302) 834-4521	DOCUMENT NO. DE-A-01

SOLID WASTE MGT. BRANCH
P.O. BOX 1401
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEAR
USING A BALL POINT PEN.

PART A

DOCUMENT NO. DE-A: **0110**

GENERATOR NAME	GENERATOR SITE ADDRESS	PHONE NO.	EPA I.D. NO.
Ed. Tatnall Bldg.	P.O. Box 607 Millboro, DE 19966	302-934-8111	DE-0141391518
Transporter Name	Address	Phone No.	EPA I.D. No.
Ches-Clean	6950 Ordinance Pt. Rd. Baltimore, MD	301-636-1616	MD-0069372748
Treatment, Storage or Disposal Facility Name	Address	Phone No.	EPA I.D. No.
Ches-Clean	1910 Russell St. Baltimore, MD	301-685-3910	MD-00006447597

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE:
THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR

UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO.	TYPE	EPA HAZ CODE	EPA WASTE TYP
	SOLID	LIQUID	GAS		GALLONS	CU YDS	POUNDS				
UA-1906				5500				1	TT	T	F 0 0

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED):

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State. The wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the above named materials, wastes, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

DATE OF SHIPMENT	TITLE	DATE TO BE SHIPPED	EXPECTED ARRIVAL DATE
7/25/81	FB II	7/25/81	7/27/81
DATE AND SIGNATURE OF CERTIFICATION OFFICER	TRAILER LICENSE PLATE NO.	STATE	NUMBER
7/25/81	AD 14153E	DE	7 25 81

DISPOSER STATE - MAILED BY GENERATOR

- Part A of copy 1 and copy 2 to the Disposer State and retains Part A of copy 3 for the Disposer State.
1. The Disposer State carries the remaining copies of the manifest with the shipment.
 2. The Disposer State, upon receipt of the shipment to the Designated Treatment, Storage or Disposal Facility, obtains the signature and certification of the TSD Facility's authorized representative and retains copy 5 of the manifest.
 3. The Disposer State, upon shipment to the Designated Treatment, Storage or Disposal Facility, obtains the signature and certification of the TSD Facility's authorized representative and retains copy 6 of the manifest.
 4. If more than four hazardous wastes from the same generator are to be shipped in the same shipment, additional manifests must be prepared by the generator.
 5. Note the above instructions hold for Interstate and Intrastate shipments. If there are any questions or clarification regarding the instructions please contact the DNREC, Solid Waste Mgt. Branch, P.O. Box 1401, Ed. Tatnall Bldg., Dover, DE 19901 or call (302) 736-4781.

AR100026

GENERATOR - Information in the Green Section to be completed by Waste Originator - See Back of Form
MANIFEST DOCUMENT NO. A 72710

Generator EPA I.D. No. 010000000000000000
 Description of Waste 01 Select and Enter One Code from Description Listed Below
 Generator Name W. R. KANE
 Address 1011 S. 1st St. P.O. Box 15924
 Phone No. 312-274-2411
 Shipment Date 07-23-81
 Hauler EPA I.D. No. 010000000000000000
 Facility EPA I.D. No. 010000000000000000
 Facility Name & Address Clem-Close Baltimore MD

- WASTE DESCRIBED
- 01 Organic Liquid
 - 02 Organic Waste Water
 - 03 Organic Liquid
 - 04 Organic Liquid
 - 05 Organic Sludge
 - 06 Inorganic Solid
 - 07 Organic Solid
 - 08 Mixed Chemical Liquid
 - 09 Mixed Chemical Sludge
 - 10 Inorganic Liquid
 - 11 Mixed Chemical Liquid
 - 12 Inorganic Sludge
 - 13 Mixed Chemical Sludge
 - 14 Organic Solid
 - 15 Mixed Chemical Solid

Vehicle Certification Number 12111
 Facility Name & Address Clem-Close Baltimore MD
 Shipping Name contaminated cooling water waste fluid
 Proper Use corrosive
 US DOT Hazard Class 3
 UN Number 1506
 Quantity 1 Container 1 Type 01 EPA Code 01 Approx. Weight 100

CONTAINER NO.	QUANTITY	TYPE	EPA CODE	APPROX. WEIGHT
1	1	01	01	100
TOTAL				

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type) F. R. Kane Sign of Agent [Signature] Generator's Emergency Telephone Number 312-274-2411

HAULER - Information in the Pink Section to be completed by Waste Hauler - See Instructions on Back of Form
 NO. A 72710

Company Name of Hauler American Truck Trucking Inc.
 Hauler EPA I.D. No. 010000000000000000
 Date Material Delivered to Facility 07-23-81
 Facility EPA I.D. No. 010000000000000000
 Facility Name & State (Destination) Clem-Close Baltimore MD
 Date Material Accepted by Hauler 07-23-81

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

F. R. Kane Name(s) of Vehicle Driver (Print)
F. R. Kane 7/23/81 Driver Signature

FACILITY - Information in this Section to be completed by Facility - See Instructions on Back of Form
 (DISPOSAL TREATMENT STORAGE)
 NO. A 72710

Facility Name Chatham Chemical Co.
GENERATOR - MAILED BY TSD FACILITY
 PART 9
 TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPLING WITH SHIPMENT
 TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT
 TRAILER LICENSE NO. 010000000000000000
 TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPLING WITH SHIPMENT
 TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS.
 GENERATOR EPA ID NO. 010000000000000000
 REJECTED DATE OF DISPOSAL OR TREATMENT
 TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE AND CERTIFICATION
 DATE RECEIVED
 TITLE
 DATE RECEIVED

In case of an emergency on this manifest call the National Hazardous Waste Hotline at 1-800-424-9302 and the State (202) 834-4511

AP100027 DOCUMENT NO. DE-A-01106

SOLID WASTE MGT. BRANCH
 P.O. BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USE PREVIOUS EDITIONS
 USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **01111**

PART A

GENERATOR NAME P&M Millsboro	SITE ADDRESS P.O. Box 607 Millsboro, DE 19966	PHONE NO. 302-934-8111	EPA I.D. NO. DE D 0 4 3 9 1 5 8 0 2 0 0
TRANSPORTER NO. 1 American Truck Truck	6350 Ordianca Pt. Rd. Baltimore, MD	301-636-1616	MD D 0 1 6 9 3 1 2 1 7 4 6
TREATMENT, STORAGE OR DISPOSAL FACILITY Chem-Clear	1910 Russell St/ Baltimore, MD	301-685-3910	MD T 0 1 0 0 1 6 4 7 1 5 0 7

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
 THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1	contaminated cooling water waste flux	corrosive	1A 1906	x			5500				1	TT	T F 0 1
2													
3													
4													

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	TITLE FR III	DATE TO BE SHIPPED 7/25/81	EXPECTED ARRIVAL DATE MONTH DAY YEAR 7/25/81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. 2AD	STATE MD	DATE RECEIVED MONTH DAY YEAR 7-25-81

GENERATOR STATE - MAILED BY GENERATOR

AR100028

GENERATOR - Information in the Green Section to be completed by Waste Generator - See Back of Form

MANIFEST DOCUMENT NO. A 72708

Generator EPA I.D. Number: **D E D 0 4 3 9 9 9 9 9 9**

Generator Name: **Cham-Clear Baltimore**

Generator Address: **P O Box 477, Baltimore, MD 21206**

Phone No.: **314-621-1111**

Shipment Date: **07 23 81**

Trailer EPA I.D. No.: **H D T 0 0 0 6 4 7 9 3 7**

Vehicle Certification Number: **1 2 1 7 3**

Facility EPA I.D. No. (Destination): **H D T 0 0 0 6 4 7 9 3 7**

Facility Name & Address: **Cham-Clear Baltimore**

Descriptions of Waste: **CLM**

Select and Enter One Code from Description Listed Below:

01 Substrates 02 Grease 03 Acids

04 Cleaners/Waste Water 05 Oils 06 Inorganic Solids

07 Organic Liquids 08 Mixed Chemical Liquids 09 Organic Sludges

10 Organic Sludges 11 Mixed Chemical Sludges 12 Organic Solids

13 Inorganic Solids 14 Mixed Chemical Solids

WASTE CHARACTERISTICS: **WASTE CHARACTERISTICS**

TYPE CODES:

01 DRUM 02 CARTONS 03 BARS 04 TANKS 05 TANK (TRUCK)

06 PUMPS/STORAGE 07 TANK TRUCK 08 OTHER

OTHER APPLICABLE CODE: **2**

SHIPPING NAME PROPER MSDI	MSDIT HAZARD CLASS	UN OR NA NUMBER	FORM	QUANTITY	WHOLE	CONTAINER TYPE	SPILL	WASTE TYPE	CONCENTRATION
Specialized cooling additive		1500		1		0		700	10
Water-based flux									
TOTAL									

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Driver Signature: _____ Date: _____

Name of Authorized Agent (Print or Type): _____ Signature of Agent: _____

HAULER - Information in this Pink Section to be completed by Waste Hauler - See Instructions on Back of Form NO. **A 72708**

Company Name of Hauler: **American Tank Truck, Inc.**

Hauler EPA I.D. No.: **H D T 0 0 0 6 4 7 9 3 7**

Vehicle Certification Number: **1 2 1 7 3**

No. of Containers & Type: **0 1**

TYPE CODES: 01 DRUM 02 CARTONS 03 BARS 04 TANKS 05 TANK (TRUCK) 06 PUMPS/STORAGE 07 TANK TRUCK 08 OTHER

Date Material Accepted by Hauler: **07 23 81**

Date Material Delivered to Facility: **07 23 81**

Facility EPA I.D. No.: **H D T 0 0 0 6 4 7 9 3 7**

Facility Name & State (Destination): **Cham-Clear Baltimore MD**

Generator EPA I.D. No.: **D E D 0 4 3 9 9 9 9 9 9**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Name(s) of Vehicle Driver (Print): _____ Driver Signature: _____

FACILITY - Information in this Section to be completed by Facility - See Instructions on Back of Form NO. **A 72708**

Facility Name: _____

GENERATOR - MAILED BY TSD FACILITY

DATE DELIVERED: **7 23 81**

DATE RECEIVED: **7 23 81**

TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT

TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT

TRANSPORTER NO. 3 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT

DATE DELIVERED: _____ DATE RECEIVED: _____

THE AT-TREATMENT STORAGE OR DISPOSAL FACILITY INDICATES IF ANY CAPILLARIES IN THE MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS.

EXPECTED DATE OF DISPOSAL OR TREATMENT: _____

DATE RECEIVED: _____

DOCUMENT NO. DE-A **01111**

IN CASE OF AN EMERGENCY, OR SPILL, IMMEDIATELY CALL THE NATIONAL HAZARDOUS CENTER (800) 424-9302 AND THE STATE (302) 834-4531

SOLID WASTE MGT. BRANCH
P.O. BOX 1401
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

PART A

DOCUMENT NO. DE-A **01109**

GENERATOR NAME OR EAM Millsboro	SITE ADDRESS P.O. Box 607 Millsboro, DE 19966	PHONE NO. 302-934-8111	EPA I.D. NO. DE D 0 4 3 9 5 8 3 8 6
TRANSPORTER NO. 1 American Tank Truck	6350 Ordinance Pt. Rd. Curtis Bay, MD	301-636-1616	MD D 0 6 9 3 7 2 7 6
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY Chesapeake	1910 Russell St. P. D. 111, MD	301-685-3910	M.D.T.O.0.0.6.1.7.5.2.7

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1	CONTAMINATED COOLING WATER WASTE FLUX	CORROSIVE	UA 1906	X			500	X			1 TT T	TF001	
2													
3													
4													

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION II, a. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NON-HAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED.

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Lawrence S. Shipper</i>	TITLE FE III	DATE TO BE SHIPPED 7/25/81	EXPECTED ARRIVAL DATE MONTH 7 DAY 25 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Don W. ...</i>	TRAILER LICENSE PLATE NO. MD A94532	STATE MD	DATE RECEIVED MONTH 7 DAY 25 YEAR 81

GENERATOR STATE - MAILED BY GENERATOR

AR100030

GENERATOR - Information in this Green Section to be completed by Waste Originator - See Back of Form

MANIFEST DOCUMENT NO. **A 7270**

Generator EPA I.D. No. **E D O 4 3 9 5 8 3 8 8**

Describe of Waste **CLW** Select and Enter One Code from Description List on Below

Generator Name
Address
Phone No. **301-271-1111**

Acute Toxic Corrosive Flammable Liquid Flammable Solid Oxidizing Organic Peroxide Poisonous Radioactive Volatile Organic Compound Air Pollutant Inorganic Acid Inorganic Base Inorganic Oxide Inorganic Peroxide Organic Chemical Organic Peroxide Organic Solvent Mixed Chemical Mixed Chemical Solvent

Shipment Date **11/7/75**

WASTE IDENTIFICATION

Trailer EPA I.D. No. **E P D C 6 9 3 7 2 7 1 A**

TYPE CODES

Vehicle Certification Number **1 A 1 1**

OTHER APPLICABLE CODES

Facility EPA I.D. No. **E P D C 6 9 3 7 2 7 1 A**
Facility Name & Address **Chem-Clear Industries**

ROAD LIQUID TONS
ROAD SOLID TONS
LIQUID GALLONS
SOLID POUNDS

SHIPMENT NAME PROPER USE DOT	US DOT HAZARD CLASS	UN OR NA NUMBER	QUANTITY	CONTAINERS	HAZ. CLASS	HAZ. CODE	CONCENTRATION
TOTAL							

Driver Signature _____ Date _____

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type) _____ Signature of Agent _____ Generator's Emergency Telephone Number _____

HAULER - Information in this Pink Section to be completed by Waste Hauler - See Instructions on Back of Form NO. **A 7270**

Company Name **American Tank Truck, Inc.**

Date Material Delivered to Facility **11/7/75**

Trailer EPA I.D. No. **E P D C 6 9 3 7 2 7 1 A**

Facility EPA I.D. No. **E P D C 6 9 3 7 2 7 1 A**

Vehicle Certification Number **1 A 1 1**

Facility Name & Site **Chem-Clear Industries**

No. of Containers & Type **TYPE CODES**

GENERATOR EPA I.D. No. **E D O 4 3 9 5 8 3 8 8**

Date Material Accepted by Hauler **11/7/75**

HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Name(s) of Vehicle Driver (Print) _____ Driver Signature _____

FACILITY - Information in this Section to be completed by Facility - See Instructions on Back of Form NO. **A 7270**

Facility Name **GENERATOR - MAILED BY TSD FACILITY**

PART B TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT

TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT

TRANSPORTER NO. 3 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT

THE ATMLMT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF HAZARDOUS FOR AND DISPOSITION OF REJECTED MATERIALS.

DATE WHEN EPA IS TO BE NOTIFIED _____ EXPECTED DATE OF DISPOSAL OR TREATMENT _____

DATE WHEN EPA IS TO BE NOTIFIED _____ DATE RECEIVED _____

DOCUMENT NO. DE-A-0110

ART 0003

SOLID WASTE MGT. BRANCH
 P.O. BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **01110**

PART A

GENERATOR NAME NCR E&M Millsboro	SITE ADDRESS P.O. Box 607 Millsboro, De 19966	PHONE NO. 302-934-8111	EPA I.D. NO. D.E.D.O. 4-3-9-5-8-3-00
TRANSPORTER NO. 1 (IF ANY) American Tank Truck	Baltimore, MD	301-636-1616	M.D.D.O. 6-9-3-7-2-7-4-6
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT STORAGE OR DISPOSAL FACILITY Chem-Clear	1910 Russell St Baltimore, MD	301-685-2910	M.D.T.O. 0-0-0-4-7-5-9-7

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING, AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS		GALLONS	CU YDS	POUNDS			
1	Antimicrobial Cooling Water Waste Flux	Corrosive	JA 1906	X			5500 X				1 TT T	F001	
2													
3													
4													

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James A. [Signature]</i>	TITLE E.E. III	DATE TO BE SHIPPED 7/25/81	EXPECTED ARRIVAL DATE MONTH 7 DAY 25 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>James C. [Signature]</i>	TRAILER LICENSE PLATE NO. STATE MD NUMBER A-994633	DATE RECEIVED	MONTH DAY YEAR

GENERATOR STATE - MAILED BY GENERATOR

AR100032

SOLID WASTE MGT. BRANCH
 P.O. BOX 14-1
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **01108**

PART A

GENERATOR NAME MCR Don Miller	SITE ADDRESS Mitchell Rd, Millsboro, DE 6350 Ordinance Pt. Rd.	PHONE NO. 302-934-8111	EPA I.D. NO. D E D O 4 3 9 5 8 3 8 8
TRANSPORTER NO. 1 American Tank Truck	Curtis Bay, MD	301-636-1616	M D D O 6 9 3 7 2 7 4 6
TREATMENT, STORAGE OR DISPOSAL FACILITY Chem-Clear	1910 Russell St Baltimore, MD	301-685-3910	M D D O 0 0 6 4 7 5 2 7

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
 THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS			
1	Spent mineral filling water Waste Blue	Corrosive	UN196	X				5500	X			1 T T F O O 1		
2														
3														
4														

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.E. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James E. Miller</i>	TITLE BE III	DATE TO BE SHIPPED 7/25/81	EXPECTED ARRIVAL DATE MONTH DAY YEAR 7 21 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Robert Stalder</i>	TRAILER LICENSE PLATE NO. STATE NUMBER MD A94522	DATE RECEIVED MONTH DAY YEAR	

GENERATOR STATE - MAILED BY GENERATOR

AR100034

SOLID WASTE MGT. BRANCH
 BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

DOCUMENT NO. DE-A- **01115**

PART A

GENERATOR NAME WATER MGR P&M Millsboro	SITE ADDRESS P.O. Box 607 Millsboro, DE 19966	PHONE NO. 302-934-8111	EPA I.D. NO. D E D 0 4 2 2 5 0 3 8
TRANSPORTER NO. 1 American Tank Truck	6350 Ordinance Pt. Rd. Baltimore, MD	301-636-1616	M D D 0 1 6 9 0 1 7 2
TREATMENT, STORAGE OR DISPOSAL FACILITY Chem-Clear	1910 Russell St.	301-685-3910	M D D 0 0 0 4 4 1 7 5 9

IF MORE THAN ONE MANIFEST FORM IS SHIPPED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	SLUDGE		GALLONS	CU YDS	POUNDS			
1	contaminated cooling water						5500				1	TT	T F 0 0 1
2	waste water flux	corrosive	UA 1986	X									
3													
4													

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S.; EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	TITLE JETT	DATE TO BE SHIPPED 7/25/81	EXPECTED ARRIVAL DATE MONTH 7 DAY 25 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. MD A745732	DATE RECEIVED MONTH 7 DAY 25 YEAR 81	

GENERATOR STATE - MAILED BY GENERATOR

AR100036

GENERAL - Information in this Green Section to be completed by Waste Generator. See Back of Form. **MANIFEST DOCUMENT NO. A 75357**

Generator EPA ID No. **01240649990000**
 Generator Name **ACI & CUI WASTE**
 Generator Address **11331 Ave. DC 10360**
 Phone No. **301-281-1111**
 Shipment Date **072901**
 Hauler EPA I.D. No. **01000093737A0**
 Vehicle Certification Number **1111111111111111**

Description of Waste: **01** Solids, **02** Liquids, **03** Acids, **04** Gases, **05** Sludges, **06** Miscellaneous
 Select and Enter One Code from Description List Below:
 01 Solids
 02 Liquids
 03 Acids
 04 Gases
 05 Sludges
 06 Miscellaneous
 WASTE DESCRIPTION: _____

Facility EPA I.D. No. **0100000000000000**
 Facility Name & Address **Chem-Clear Baltimore MD**

TYPE CODES

01	DRUM
02	CANISTER
03	TANK
04	TANK TRAILER
05	TRUCK
06	TRUCK TRAILER
07	OTHER

ENTER APPLICABLE CODE:
 BY WEIGHT
 MULTIMANIFESTER

SHIPMENT NAME	US DOT HAZARD CLASS	UN OR NA NUMBER	FORM	QUANTITY	HAZ. CODE	CONTAINER TYPE	WASTE TYPE	EMERGENCY
concentrated cooling water	corrosive	14399	NA	100	3	01	01	100
water flux	corrosive							
		TOTAL		100	3	01	01	100

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.
 Driver Signature: *[Signature]* Date: **07/29/01**
 Name of Authorized Agent (Print or Type): _____ Signature of Agent: _____ Generator's Emergency Telephone Number: _____

HAULER - Information in this Pink Section to be completed by Waste Hauler. See Instructions on Back of Form. **NO. A 75357**

Company Name of Hauler **Acme Truck Spk. Inc.**
 Hauler EPA I.D. No. **01000093737A0**
 Vehicle Certification Number **1111111111111111**
 No. of Containers & Type: **01** DRUM, **02** CANISTER, **03** TANK, **04** TANK TRAILER, **05** TRUCK, **06** TRUCK TRAILER, **07** OTHER
 Date Material Accepted by Hauler **072901**

Date Material Delivered to Facility **072901**
 Facility EPA I.D. No. **0100000000000000**
 Facility Name & State (Destination) **Chem-Clear Baltimore MD**
 Generator EPA I.D. No. **01240649990000**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MANY FEDERAL, STATE AND LOCAL LAWS AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.
 Name(s) of Vehicle Driver (Print) **Scott S Baker** Driver Signature: *[Signature]*

FACILITY - Information in this Section to be completed by Facility. See Instructions on Back of Form. **NO. A 75357**

Facility Name **PAR B** Date Hazardous Waste Received **072901**
GENERATOR - MAILED BY TSD FACILITY

TO BE FILLED ON BY TSD FACILITY	TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE RECEIVED
	TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT	DATE RECEIVED
	TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
	THE ATTEMPT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF RECORD FOR AND DISPOSITION OF REJECTED MATERIALS.	HANDLING METHOD
GENERATOR EPA I.D. NO.	EXPIRES DATE OF DISPOSAL ON THE ATTEMPT	
THE ATTEMPT STORAGE OR DISPOSAL FACILITY SIGNATURE AND CERTIFICATION	DATE RECEIVED	

In case of an emergency or spill, immediately call the National Response Center (800) 424-8802 and the State (202) 834-4521. **DOCUMENT NO. DE-A 01115**

SOLID WASTE MGT. BRANCH
 P.O. BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **01113**

PART A

GENERATOR NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
Mr. R. M. Millsboro	P.O. Box 607	302-224-8111	D.D.P. 0-4-3-9-2-0-3-8-2
TRANSPORTER NO. 1	Millsboro, De 19966		
American Tank Truck	6350 Ordinance Pt. Rd.	301-636-1616	M.D.D. 0-6-9-3-7-2-7-4-6
TRANSPORTER NO. 2 (IF ANY)	Baltimore, MD		
TREATMENT, STORAGE OR DISPOSAL FACILITY	1910 Russell St	301-683-3910	M.D.T. 0-0-8-0-4-7-5-9-7
Chem. Class			

IF MORE THAN ONE MANIFEST FORMS ARE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
 THIS FORM IS NO. **1** OUT OF A TOTAL OF **1** THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
contaminated cooling water waste flux	corrosive	UA-1906				5500				1	TI	TFOU1
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Russell Millsboro</i>	TITLE <i>TE III</i>	DATE TO BE SHIPPED <i>7/25/81</i>	EXPECTED ARRIVAL DATE MONTH <i>7</i> DAY <i>25</i> YEAR <i>81</i>
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Francis W. Stapp</i>	TRAILER LICENSE PLATE NO. <i>MD A94033</i>	STATE <i>MD</i>	DATE RECEIVED MONTH <i>7</i> DAY <i>25</i> YEAR <i>81</i>

GENERATOR STATE - MAILED BY GENERATOR

ARI00038

GENERATOR - Information in the Green Section to be completed by Waste Generator - See Back of Form

MANIFEST DOCUMENT NO. **A 72711**

Generator EPA I.D. Number: **MD0049303030**

Description of Waste: **CLM** Select and Enter One Code from Description List Below

Waste Generator Name: **Cham-Clear Baltimore**

Solvent Acid Inorganic Liquid Organic Liquid

Facility Name: **Cham-Clear Baltimore**

Organic Waste Water Oil Inorganic Solid Organic Solid

Address: **Baltimore, MD 21206**

Organic Sludge Mixed Chemical Liquid Inorganic Sludge Mixed Chemical Sludge Organic Sludge

Phone No: **310-246-1111** (USE ONLY)

Inorganic Solid Mixed Chemical Solid

Shipment Date: **072581**

WASTE RECEIPTS

Hauler EPA I.D. No.: **MD0049372746**

TYPE CODES: Drum, Can, Box, Tank, Other

Vehicle Certification Number: **1A1111**

UNION APPLICABLE CODE: BY WEIGHT, MILLIBAR/INCH

Facility EPA I.D. No. (Destination): **MDT00047537**

OTHER LIQUID SOLID, TONS, GALLONS, YARDS, POUNDS

Facility Name & Address: **Cham-Clear Baltimore MD**

SHIPPING NAME	MS DS HAZARD CLASS	UN OR RC NUMBER	FORM	QUANTITY	WEIGHT	CONTAINER	HAZ	REG	HAZ	REG	HAZ	REG	HAZ	REG	HAZ	REG	HAZ	REG
Water Waste Flux	corrosive	1A	1986			Drum	0	0	0	0	0	0	0	0	0	0	0	0

Driver Signature: **[Signature]** Date: **072581**
A 72711

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type): **[Signature]** Title: **AGENT** Agency: **Cham-Clear Baltimore MD**

HAULER - Information in the Pink Section to be completed by Waste Hauler - See Instructions on Back of Form NO. **A 72711**

Company Name of Hauler: **American Tank Truck, Inc.**

Date Material Delivered to Facility: **072581**

Hauler EPA I.D. No.: **MD0049372746**

Facility EPA I.D. No.: **MDT00047537**

Vehicle Certification Number: **1A1111**

Facility Name & State (Destination): **Cham-Clear Baltimore MD**

No. of Containers & Type: **01** (TYPE CODES: Drum, Can, Box, Tank, Other)

Generator EPA I.D. No.: **MD0049303030**

Date Material Accepted by Hauler: **072581**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Driver Signature: **[Signature]** Name(s) of Vehicle Driver (Print): **[Signature]**

FACILITY - Information in this Section to be completed by Facility - See Instructions on Back of Form NO. **A 72711** (DISPOSAL TREATMENT STORAGE)

Facility Name: **Cham-Clear Baltimore, Inc.**

Date Hazardous Waste Received: **072581**

GENERATOR - MAILED BY TSD FACILITY

TO BE FILLED OUT BY GENERATOR	TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT		DATE DELIVERED	
	[Signature]		MONTH: 07	DAY: 25
	TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT		MONTH: 07	DAY: 25
	[Signature]		MONTH: 07	DAY: 25
TO BE FILLED OUT BY FACILITY	THE ATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASON(S) FOR AND DISPOSITION OF REJECTED MATERIALS.		HANDLING METHOD(S)	
			1	
	FACILITY EPA I.D. NO.		2	
	DATE RECEIVED		3	
FACILITY SIGNATURE AND CERTIFICATION		4		
		5		
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		31		
		32		

In case of an emergency of spill, immediately call the National Response Center (800) 424-8802 and the State (302) 834-4523

ART00039 DOCUMENT NO. DE-A 01113

SOLID WASTE MGT. BRANCH
P.O. BOX 1401
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
USING A BALL POINT PEN.

PART A

DOCUMENT NO. DE-A- **01104**

GENERATOR NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
RAM - Millsboro TRANSPORTER NO. 1	P.O. Box 607 Millsboro, DE 19966 9407 Thornwood Drive Baltimore, MD 21234	302-934-8111 301-354-0751	DE D 0 6 1 3 9 5 A 3 8 8 MD D 0 8 2 6 0 4 5 5 6
Clear America TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY	American Recovery Baltimore, MD	301-388-0137	MD D 0 7 4 2 3 3 9 2

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS			
1	Cleaning Waste Water	Corrosive	HA 1906	X				3500				1 TT	T	0 0 6
2														
3														

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	TITLE IE III	DATE TO BE SHIPPED 7-22-81	EXPECTED ARRIVAL DATE 7-22-81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. M 0 A1942C	STATE MD	DATE RECEIVED

GENERATOR STATE - MAILED BY GENERATOR

AR100040

GENERAL

Information in this Green Section to be completed by Waste Generator - See Back of Form

MANIFEST DOCUMENT NO. A 72703

Generator EPA I.D. No. 00000000000000000000 Select and Enter One Code from Description List Below

Waste Name Waste

Quantity 1 Unit DRUM

Waste Characteristics: Corrosive Acid Ignitable Liquid Ignitable Solid Flammable Liquid Flammable Solid Toxic Hazardous Waste Other Inorganic Liquid Inorganic Solid Organic Liquid Organic Solid Mixed Chemical Liquid Mixed Chemical Solid Other

Phone No. 714 714 1111

Shipment Date 7 2 2 1 9 8

Hauler EPA I.D. No. H 7 0 0 R 2 6 7 4 9 5 5 4

Vehicle Certification Number 8 1 A 9 3 0 7

Facility Name & Address American Recovery RD

Facility EPA I.D. No. H 0 0 0 7 7 4 9 2 3 9 9 2

WASTE DESCRIPTION

TYPE CODES: DRUM CARTON TANK TANK TOWER TANK TOWER OTHER

ENTER APPLICABLE CODE: N BY WEIGHT MULTIMANIFESTER

SHIPPING NAME SP9999 US DOT	US DOT HAZARD CLASS	HAZARD NUMBER	HAZARD CLASS	QUANTITY	UNIT	CONTAINERS	TYPE	NO. OF	CONC.
<u>Cleaning Water</u>	<u>Corrosive</u>	<u>0 1 9 1 4</u>	<u>3</u>	<u>1</u>	<u>DRUM</u>	<u>1</u>	<u>7</u>	<u>7</u>	<u>7</u>
				TOTAL		1		7	

Other Signatures: _____ Date: _____

Ass Code: 1 0 2 9 9 4 5 1 1 1

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type) _____ Signature of Agent _____ Generator's Emergency Telephone Number _____

HAULER - Information in this Pink Section to be completed by Waste Hauler - See Instructions on Back of Form NO. A 72703

Company Name of Hauler Clean America, Inc.

Hauler EPA I.D. No. H 0 0 0 7 7 4 9 2 3 9 9 2

Vehicle Certification Number 8 1 A 9 3 0 7

No. of Containers & Type: DRUM CARTON TANK TANK TOWER OTHER

Date Material Delivered to Facility 7 2 2 1 9 8

Facility Name & State (Destination) American Recovery RD

Generator EPA I.D. No. H 0 0 0 7 7 4 9 2 3 9 9 2

Date Material Accepted by Hauler 7 2 2 1 9 8

Name(s) of Vehicle Driver (Print) _____ Driver Signature _____

FACILITY - Information in this Section to be completed by Facility - See Instructions on Back of Form (DISPOSAL TREATMENT STORAGE) NO. A 72703

Facility Name & State _____ Date Hazardous Waste Received _____

GENERATOR - MAILED BY TSD FACILITY

PART B

TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
THE RECEIVING STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR SUCH DIFFERENCES	DATE RECEIVED
GENERATOR EPA I.D. NO.	DATE RECEIVED
THE RECEIVING STORAGE OR DISPOSAL FACILITY SIGNATURE AND CERTIFICATION	DATE RECEIVED

EXPIRES DATE OF DISPOSAL OR TREATMENT

DOCUMENT NO. DE-A 011

WASTE MGT. BRANCH
 BOX 1401
 DE 19031

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
 USING A BALL POINT PEN.

DOCUMENT NO. DE-A- 01105

TA	NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
1	NCR E&M - Millsboro TRANSPORTER NO. 1	P.O. Box 607 Millsboro, DE 19966	302-934-8111	DE D 0 4 3 9 5 8 3 8 8
2	American Tank Truck TRANSPORTER NO. 2 (IF ANY)	6350 Ordinance Pt. Rd. Curtis Bay, MD 21225	301-636-1616	M D D 0 6 9 3 7 2 7 4 6
	TREATMENT, STORAGE OR DISPOSAL FACILITY	American Recovery Baltimore, MD 21219	301-388-0837	M D D 0 7 4 9 2 3 3 9 2

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE			
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			POUNDS	TONS		
1 Cleaning waste water	Corrosive	UA1906	X			5500	X			1	TT	T	F	0	6
2															
3															
4															

SEE THE REVERSE SIDE FOR INSTRUCTIONS INCLUDING CONTAINER LABELING. THIS FORM IS NOT TO BE USED FOR ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED.

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	TITLE [Blank]	DATE TO BE SHIPPED 7-22-81	EXPECTED ARRIVAL DATE 7-22-81 MONTH DAY YEAR
TRANSPORTER'S SIGNATURE <i>[Signature]</i>	TRAILER LICENSE PLATE NO. [Blank]	DATE RECEIVED 7-22-81 MONTH DAY YEAR	

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
 I, the Generator, certify that I have prepared and signed this manifest and have provided a copy 1 and copy 2 to the transporters.

If more than two transporters are to be utilized, the Generator must complete an additional manifest form(s) and reference the first manifest document number on the additional manifest form(s).

I, the Transporter, certify that I have received and signed this manifest and have provided a copy 3 and copy 4 to the Generator and a copy 5 to the Treatment, Storage or Disposal Facility.

If more than four hazardous wastes from the same generator are to be shipped in the same shipment, additional manifests must be prepared by the generator.

I, the Treatment, Storage or Disposal Facility, certify that I have received and signed this manifest and have provided a copy 6 to the Generator and a copy 7 to the Transporter.

Note the above instructions hold for Interstate and Intrastate shipments. If there are any questions or clarification regarding the instructions please contact the DNREC, Solid Waste Mgt. Branch, P.O. Box 1401, Ed. Tatnall Bldg., Dover, DE 19901 or call (302) 736-4781.

I, the Designated Transporter No. 2, certify that I have received and signed this manifest and have provided a copy 8 to the Generator and a copy 9 to the Treatment, Storage or Disposal Facility.

AR100042

GENERAL INFORMATION - Information in this Green Section to be completed by Generator

MANIFEST DOCUMENT NO. **A 72702**

Generator EPA I.D. Number: **0120009999999999**
 Generator Name: **WILLIAMS**
 Generator Mailing Address: **WILLIAMS, 27 10001**
 Phone No.: **301-216-9111**

Species and Other One Code from Description Listed Below
 Solvents Caustic Acid
 Cleaning Waste Water Oils Inorganic Liquid
 Organic Liquid Mixed Chemical Liquid Inorganic Solid
 Organic Sludge Mixed Chemical Sludge Organic Solid
 Inorganic Solid Mixed Chemical Solid

Shipment Date: **07 21 81**

Hauler EPA I.D. No.: **0120009999999999**

Vehicle Certification Number: **12 11 11 11 11 11**

Facility EPA I.D. No.: **0120009999999999**
 Facility Name & Address: **WILLIAMS**

TYPE CODES
 DRUM TANKER (EXCL.)
 CAN TANKER (EXCL.)
 BOX TANKER (EXCL.)
 TANKER (EXCL.)
 TANKER (EXCL.)
 TANKER (EXCL.)
 OTHER

ENTER APPLICABLE CODES
 BY WEIGHT
 MILLIGRAM LITER

SHIPPING NAME PROPER US DOT	US DOT HAZARD CLASS	UN OR NA NUMBER	PKGS	QUANTITY	CONTAINER TYPE	HAZ. CLASS	CONCENTRATION
bleeding waste	corrosive	311111	2	99.99	DRUM	3	99
(Reference copies of lab analysis)							
			TOTAL				

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type): **WILLIAMS** Signature of Agent: **WILLIAMS** Generator's Emergency Telephone Number: **301-216-9111**

HAULER - Information in this Pink Section to be completed by Waste Hauler. See Instructions on Back of Form

Company Name of Hauler: **WILLIAMS**
 Hauler EPA I.D. No.: **0120009999999999**
 Vehicle Certification Number: **12 11 11 11 11 11**

Date Material Accepted by Facility: **07 21 81**
 Facility EPA I.D. No.: **0120009999999999**

No. of Containers & Type: **2 1**
 Date Material Accepted by Hauler: **07 21 81**

Facility Name & State (Destination): **WILLIAMS**
 Generator EPA I.D. No.: **0120009999999999**

HAULER CERTIFICATE: I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED AND PROPERLY LABELED FOR TRANSPORT TO THE FACILITY ADDRESSED ABOVE AND THAT I, THE HAULER, AM ONLY A CARRIER AND AM NOT RESPONSIBLE FOR THE REQUIREMENTS OF MANY STATE LAWS AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

FACILITY - Information in this Section to be completed by Facility. See Instructions on Back of Form

Facility Name & State (Destination): **WILLIAMS**
 Facility EPA I.D. No.: **0120009999999999**

Date Hazardous Waste Received: **07 21 81**
 Hauler EPA I.D. No.: **0120009999999999**
 Vehicle Certification Number: **12 11 11 11 11 11**

No. of Containers & Type: **2 1**
 Disposal Method: **7 12**
 Generator EPA I.D. No.: **0120009999999999**

Method of Disposal: **7 12**
 Disposal Method: **7 12**
 Generator EPA I.D. No.: **0120009999999999**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED AND THAT THE FOREGOING IS TRUE AND CORRECT.
 Name of Authorized Agent (Print or Type): **WILLIAMS** Signature: **WILLIAMS**

HAZARDOUS WASTE MANIFEST

DEPARTMENT OF HEALTH AND MENTAL HYGIENE • OFFICE OF ENVIRONMENTAL PROGRAMS

P.O. BOX 1401
DOVER, DE 19901

STATE OF DELAWARE

DOCUMENT NO. DE-A-01102

GENERATOR	SHIP ADDRESS	SHIP NO.	EPA ID NO.
NOR EM - Millsboro 1000 American Tank Truck Inc.	P.O. Box 50 Millsboro, DE 19955 9407 Thornewood Drive Baltimore, MD 21234 5350 Ordinance Pt. Rd. Curtis Bay, MD 21225 American Recovery Baltimore, MD 21219	302-934-8111 301-394-0151 301-536-1616 301-388-0837	DE A 01102 MD D 208275 MD D 0454 MD D 074923392

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
THIS FORM IS NO. 1 OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS DE A 01102

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ. CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS			
1	Cleaning waste water	Corrosive	HA 1906		X			5500	X			I TT	T F 0 0 6	
2														
3														
4														

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION II.# IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	TITLE FE-TL	DATE TO BE SHIPPED 7-21-81	EXPECTED ARRIVAL DATE MONTH 7 DAY 21 YEAR 81
TRANSPORTER(S) SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. MD A94543	DATE RECEIVED MONTH DAY YEAR	

DISPOSER STATE - MAILED BY GENERATOR

1. The Generator sends Part A of copy 1 and copy 2 to the respective States and retains Part A of copy 3 for records.

2. Transporter No. 1 carries the remaining copies of manifest along with the shipment.

3. In delivery of the shipment to the Designated Facility or Transporter No. 2, Transporter No. 1 signs and certifies delivery of the shipment, obtains the signature and certification of the TSD Facility's authorized representative or Transporter No. 2 and detaches and retains copy 5 of the manifest.

4. In delivery of the shipment to the Designated Facility, Transporter No. 2 signs and certifies delivery of the shipment, obtains the signature and certification of the TSD Facility's authorized representative and detaches and retains copy 6 of the manifest.

5. If more than two transporters are to be utilized, the Generator must complete an additional manifest form(s) and reference the first manifest document number on the additional manifest form(s).

8. If more than four hazardous wastes from the same generator are to be shipped in the same shipment, additional manifests must be prepared by the generator.

9. Note the above instructions hold for Interstate and Intrastate shipments. If there are any questions or clarification regarding the instructions please contact the DNREC, Solid Waste Mgt. Branch, P.O. Box 1401, Ed. Tatnall Bldg., Dover, DE 19901 or call (302) 736-4781.

ARI00044

PART B GENERATOR - MAILED BY TSD FACILITY

TRANSFERRER'S SIGNATURE AND CERTIFICATION OF DELIVERY AND TAMPERING WITH SHIPMENT DATE DELIVERED
 MONTH 7 DAY 22 YEAR 1988

RECIPIENT'S SIGNATURE AND CERTIFICATION OF DELIVERY AND TAMPERING WITH SHIPMENT DATE DELIVERED
 MONTH DAY YEAR

TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY TREATMENT AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS

GENERATOR EPA ID NO. EXPECTED DATE OF DISPOSAL OR TREATMENT
 MONTH DAY YEAR

TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE AND CERTIFICATION TITLE DATE RECEIVED
 MONTH DAY YEAR

In case of an emergency or spill, immediately call the National Response Center (800) 424-9333 and the State (302) 834-4531

DOCUMENT NO. DE-A-0110

PROPER USE ONLY	HAZARDOUS WASTE	CONTAINERS	EPA TYPE	CONCENTRATION
Quantity	Code	Code	Code	Code
1	1	1	1	1
...
TOTAL		A 72706		

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type) _____ Date _____
 Signature of Agent _____ Generator's Emergency Telephone Number _____
 YEAR AT THIS PERFORATION

HAULER - Information in this Pink Section to be completed by Hauler. See Instructions on Back of Form. NO. A 72706

Company Name of Hauler: American Tank Truck, Inc.

Hauler EPA I.D. No.: W D D O 4 9 3 7 2 7 4

Vehicle Certification Number: 11-1-1-1

No. of Containers & Type: 11

TYPE CODES: TRUCK (TRUCK)

Date Material Accepted by Hauler: 7/22/88

Facility Name & State (Destination): American Recovery, MD

Generator EPA I.D. No.: D E D O 4 9 3 8 1 1 8

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Name(s) of Vehicle Driver (Print) _____ Driver Signature _____

FACILITY - Information in this Section to be completed by Facility. See Instructions on Back of Form. NO. A 72706
 (DISPOSAL TREATMENT STORAGE)

Facility Name & State (Destination): American Recovery, MD

Facility EPA I.D. No.: W D D O 4 9 3 7 2 7 4

Vehicle Certification Number: 51101400

Method of Disposal: RECOVERY

Generator EPA I.D. No.: D E D O 4 9 3 8 1 1 8

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED AND THAT THE FOREGOING IS TRUE AND CORRECT.

Name of Authorized Agent (Print or Type) _____ Signature _____

HAZARDOUS WASTE MANIFEST

DEPARTMENT OF HEALTH AND MENTAL HYGIENE • OFFICE OF ENVIRONMENTAL PROGRAMS

HAZARDOUS WASTE MGT. BRANCH
 P.O. BOX 1401
 DOWERS, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **01103**

PART A

GENERATOR NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
TRP PM Millsboro TRANSPORTER NO. 1	P.O. Box 607 Millsboro, DE 19966	302-934-8111	DE P 0 4 3 9 5 8 3 9 9
Clean America	9407 Thornewood Drive Baltimore, MD 21234	301-354-0751	M D P 0 8 2 5 2 4 5 5 4
TRANSPORTER NO. 2 (IF ANY) AMERICAN RECOVERY P.O. BOX 100	8350 Ordinance Pt. Rd. Querets Bay, MD 21229	301-534-1516	
TREATMENT, STORAGE OR DISPOSAL FACILITY	American Recovery Baltimore, MD 21219	301-388-0837	M D D 0 7 4 0 2 3 3 2 2

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS 01103

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS			
1	Cleaning waste water	Corrosive	UA1906	X				3500	X			1	TT	T P 0 0 6
2														
3														
4														

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit) to do so, I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James S. Miller</i>	TITLE IE III	DATE TO BE SHIPPED 7-21-91	EXPECTED ARRIVAL DATE 7-21-91
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Ray</i>	TRAILER LICENSE PLATE NO. NO 41P42E	DATE RECEIVED 7-21-91	DATE RECEIVED 7-21-91

GENERATOR STATE - MAILED BY GENERATOR

AR100046

GENERATOR - Information in the Green Section to be completed by Waste Generator. See Back of Form.

MANIFEST DOCUMENT NO. **A 72707**

Generator EPA I.D. Number: **RD043993034**

Generator Name: **USA Corporation**

Address: **10000 ...**

Phone No: **301-221-1111**

Shipment Date: **5-7-81**

Hauler EPA I.D. No: **MD000026264934**

Vehicle Certification Number: **01A9581**

Facility EPA I.D. No. (Destination): **MD0007492319**

Facility Name & Address: **American Recovery**

Describe Waste: **069**

Select and Enter One Code from Descriptors Listed Below:

Solvents Corrosive Acid Oxidizing Flammable (Liquid) Inorganic, Liquid Organic, Liquid Mixed Chemical Liquid Inorganic Solid Organic Solid Mixed Chemical Solid

WASTE DESCRIPTION: _____

TYPE CODES: DRUM CARTON TANK TANK (BULK) OTHER (BULK) 55 GALLON DRUM OTHER

OTHER APPLICABLE CODES: A - 99 HAZARDOUS MATERIALS LISTED

SHIPMENT NAME PROPER US DOT	US DOT HAZARD CLASS	UN IDENTIFICATION NUMBER	QUANTITY	UNIT	CONTAINERS	NET WT	GROSS WT	HAZARDOUS	NON-HAZARDOUS	INCORPORATION
Cleaning solvent	Corrosive	111	100	gals	1	100	100	0	100	100
TOTAL: 100 gals										

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Area Code: **301**

Name of Authorized Agent (Print or Type): _____ Signature of Agent: _____

YEAR AT THIS PERFORMANCE: _____ Generator's Emergency Telephone Number: **301-221-1111**

HAULER - Information in the Pink Section to be completed by Waste Hauler. See Instructions on Back of Form.

Company Name of Hauler: **Clean Aerials Inc.**

Hauler EPA I.D. No.: **MD000026264934**

Vehicle Certification Number: **01A9581**

No. of Containers & Type: **1** **DRUM**

Date Material Accepted by Hauler: **07-2-81**

Date Material Delivered to Facility: **07-20-81**

Facility EPA I.D. No.: **MD0007492319**

Facility Name & Site (Destination): **American Recovery**

Generator EPA I.D. No.: **RD043993034**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Name(s) of Vehicle Driver (Print): _____ Driver Signature: _____

FACILITY - Information in this Section to be completed by Facility. See Instructions on Back of Form (DISPOSAL TREATMENT STORAGE)

Facility Name & State (Destination): **MD**

Facility EPA I.D. No. (Destination): **MD0007492319**

No. of Containers & Type: **1** **DRUM**

Shipping Quantity & Unit: **100** **gals**

Date Hazardous Waste Received: **07-21-81**

Hauler EPA I.D. No.: **MD000026264934**

Vehicle Certification Number: **01A9581**

Method of Disposal: **11**

DISPOSAL METHOD: RECOVERY INCINERATION LANDFILL STORAGE TREATMENT OTHER

Generator EPA I.D. No.: **RD043993034**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED AND THAT THE FOREGOING IS TRUE AND CORRECT.

Name of Authorized Agent (Print or Type): _____ Signature: _____

HAZARDOUS WASTE MANIFEST

DEPARTMENT OF HEALTH AND MENTAL HYGIENE • OFFICE OF ENVIRONMENTAL PROGRAMS
STATE OF MARYLAND • BALTIMORE, MARYLAND 21201

SOLID WASTE MGT. BRANCH
 P.O. BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **01101**

PART A

GENERATOR NAME NCR	SITE ADDRESS Po Box 607 Millsboro, Delaware	PHONE NO. 302-924-7111	EPA I.D. NO. D.E.D.043958388
TRANSPORTER NO. 1 527 Chesapeake Blvd. Belle Mead		PHONE NO. 301-354-0751	EPA I.D. NO. M.D.D.082604554
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY American Recovery Belle Mead			EPA I.D. NO. M.D.D.074927392

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1	Cleaning waste water	Corrosive	UN160	X			3500	X			1 TT	T F 006	
2													
3													
4													

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I. e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Thomas H. ...</i>	TITLE ERT	DATE TO BE SHIPPED 7/20/81	EXPECTED ARRIVAL DATE MONTH 7 DAY 20 YEAR 1981
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>R. ...</i>	TRAILER LICENSE PLATE NO. MD 711842a	STATE MD	DATE RECEIVED MONTH 7 DAY 20 YEAR 1981

GENERATOR STATE - MAILED BY GENERATOR

AR100048

Below is an amended list of all manifests used in the lagoon clean up.

<u>DATE</u>	<u>QUANTITY REMOVED</u>	<u>MANIFEST NUMBER</u>	
		<u>DE</u>	<u>MD</u>
<u>AMERICAN RECOVERY</u>			
7-20-81	3,500 gallons	01101	72701
7-21-81	3,500 gallons	01103	72707
7-21-81	5,500 gallons	01102	72706
7-22-81	5,500 gallons	01105	72702
7-22-81	3,500 gallons	01104	72703
 <u>CHEM-CLEAR</u>			
7-25-81	5,500 gallons	01109	72704
7-25-81	5,500 gallons	01110	72705
7-25-81	5,500 gallons	01111	72708
7-25-81	5,500 gallons	01112	72709
7-25-81	5,500 gallons	01114	72712
7-25-81	5,500 gallons	01113	72711
7-25-81	5,500 gallons	01115	75357
7-25-81	5,500 gallons	01108	71241
7-25-81	5,500 gallons	01106	72710
7-27-81	3,500 gallons	01116	72713
8-5-81	3,500 gallons	01119	72715
8-5-81	5,500 gallons	01117	72717

AR100050

Page 2

<u>DATE</u>	<u>QUANTITY REMOVED</u>	<u>MANIFEST NUMBER</u>	
		<u>DE</u>	<u>MD</u>
8-5-81	5,500 gallons	01107	72719
8-5-81	5,500 gallons	01118	72718
8-6-81	5,500 gallons	15633	75356
8-6-81	5,500 gallons	15632	75353
8-6-81	5,500 gallons	15631	83075
8-6-81	1,700 gallons	15630	72716

LJM/bp

AR100051

Betz • Converse • Murdoch • Inc.

APPENDIX 5
MANIFEST - LAGOON CLEANUP WASTES

AR100052

Telephone: (301) 354-0751

Nights & Weekends: (301) 668-7174
(301) 574-4412

CLEAN AMERICA, INC.

(POLLUTION CONTROL)

9407 THORNEWOOD DRIVE - BALTIMORE, MARYLAND 21234

September 24, 1981

N. C. R. Corporation
P. O. Box 607
Millsboro, Delaware 19967

Attention: Ms. Lori Masloski

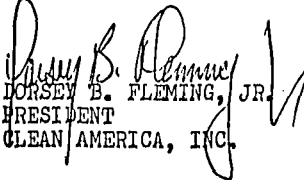
RE: Clean-up Operations
N. C. R. Corporation
Millsboro, Delaware

TO WHOM IT MAY CONCERN:

This letter does verify that Clean America, Inc., has cleaned and removed from the (Drum Storage Area) a small amount of chemical that was spilled from a leaking drum. This job was completed, to the best of our knowledge, in compliance with any and all existing State and Federal Laws.

The debris from this clean-up operations was disposed of, at B. F. I. Solley Road, Baltimore, Maryland. The Hazardous Waste Manifest System was used for the proper disposal of this material.

Any further questions concerning the above should be directed to Dorsey B. Fleming, at 301-354-0751.


DORSEY B. FLEMING, JR.
PRESIDENT
CLEAN AMERICA, INC.

DBF,JR:nd

PURCHASING--

AR100053

SEP 81 10: 36

GENERATOR - This portion of this section to be completed by Waste Generator - See Back of Form

MANIFEST DOCUMENT NO: **A 83072**

Generator EPA Number: **D E D 0 4 3 9 5 8 3 8 9**
 Generator Name: **MCR, DAN-Millsboro**
 Address: **P.O. Box 607**
Millsboro, DE 19966
 Phone No.: **302-334-8111**

Year: **5**
 Select and Enter One Code from Description List Below:
 100 Corrosive
 110 Flammable Liquid
 120 Flammable Solid
 130 Oxidizing Liquid
 140 Oxidizing Solid
 150 Inorganic Liquid
 160 Inorganic Solid
 170 Organic Liquid
 180 Organic Solid
 190 Hazardous Waste
 200 Mixed Chemical Waste
 210 Mixed Chemical Sludge
 220 Mixed Chemical Solids
 230 Mixed Chemical Solids

Event Date: **0 9 0 3 1**
 EPA No.: **H N D 0 2 3 4 0 4 4 2 4**
 Manifest Certification Number: **811A0584**

TYPE CODES:
 100 Corrosive
 110 Flammable Liquid
 120 Flammable Solid
 130 Oxidizing Liquid
 140 Oxidizing Solid
 150 Inorganic Liquid
 160 Inorganic Solid
 170 Organic Liquid
 180 Organic Solid
 190 Hazardous Waste
 200 Mixed Chemical Waste
 210 Mixed Chemical Sludge
 220 Mixed Chemical Solids
 230 Mixed Chemical Solids

ENTER APPLICABLE CODE:
 A BY AIR
 P BY TRUCK

City, State, Zip: **D E D 0 7 4 9 2 3 7 9 2**
 Shipper Name: **American Recovery Corporation**
 Shipping Name: **Corrosive**
 US DOT Hazard Class: **Corrosive**

CONTAINER NO.	QUANTITY	CONCENTRATION
1	2860	200
2	2860	200
3	2860	200
4	2860	200
5	2860	200
6	2860	200
7	2860	200
8	2860	200
9	2860	200
10	2860	200
11	2860	200
12	2860	200
13	2860	200
14	2860	200
15	2860	200
16	2860	200
17	2860	200
18	2860	200
19	2860	200
20	2860	200
TOTAL	57200	200

Signature: *[Handwritten Signature]* Date: **9-2-81** TOTAL: **57200** A 83072

I hereby certify that the above named materials are properly classified, described, packaged, marked and labeled in accordance with the requirements for transportation, according to the applicable regulations of the Department of Transportation, and that the total net weight is **57200** lbs.

Signature: *[Handwritten Signature]* Date: **9-2-81** Generator's Emergency Telephone Number: **302-334-8111**

HAULER - Information in the Pink Section to be completed by Waste Hauler - See Instructions on Back of Form. NO. **A 83072**

Hauler Name: **D.S. Brown, Inc.**
 Hauler EPA No.: **H N D 0 2 3 4 0 4 4 2 4**
 Manifest Certification Number: **811A0584**
 Date Material Accepted by Hauler: **0 9 0 2 8 1**

Date Material Delivered to Facility: **0 9 0 2 8 1**
 Facility EPA I.D. No.: **M 0 7 4 9 2 3 7 9 2**
 Facility Name & State (Destination): **American Recovery Corporation, DE**
 Tracking Number: **D E D 0 4 3 9 5 8 3 8 9**

I hereby certify that the hazardous waste(s) described in this manifest have been accepted in proper condition for transport to the facility indicated and I understand that I am personally responsible for complying with all the requirements of Maryland law and regulations pertaining to designated hazardous substances.

Signature: *[Handwritten Signature]* Name(s) of Vehicle Driver(s): **[Handwritten Name]** Date: **9-2-81**

Signature: *[Handwritten Signature]* Date: **9-2-81**

Signature: *[Handwritten Signature]* Date: **9-2-81**

Signature: *[Handwritten Signature]* Date: **9-2-81**

Signature: *[Handwritten Signature]* Date: **9-2-81**

Signature: *[Handwritten Signature]* Date: **9-2-81**

Signature: *[Handwritten Signature]* Date: **9-2-81**

Signature: *[Handwritten Signature]* Date: **9-2-81**

Signature: *[Handwritten Signature]* Date: **9-2-81**

Signature: *[Handwritten Signature]* Date: **9-2-81**

Signature: *[Handwritten Signature]* Date: **9-2-81**

GENERATOR: Detach and retain this copy for your records.

HAZARDOUS WASTE MANIFEST

DEPARTMENT OF HEALTH AND MENTAL HYGIENE • OFFICE OF ENVIRONMENTAL PROGRAMS
 STATE OF MARYLAND • BALTIMORE, MARYLAND 21201

AR100056

SOLID WASTE MGT. BRANCH
 P.O. BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

ART A

DOCUMENT NO. DE-A **01119**

GENERATOR NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
NCR E&M Millsboro	DE 19966 Mitchell Rd. Millsboro	(302) 934-8111	DE0043958388
TRANSPORTER NO. 1	9407 Thornewood Dr.	(301)	
Clean America	Baltimore, MD 21234	354-0751	MD0082604554
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY	1910 Russell St.	(301)	
Chem-Clear	Baltimore, MD	685-3910	MDT000647537

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
 THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
Contaminated cooling water waste flux	corrosive	UA1906		X		350	X			1	TT	T F 0 0 1
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.E. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James E. ...</i>	TITLE FETL	DATE TO BE SHIPPED 8-5-81	EXPECTED ARRIVAL DATE MONTH 8 DAY 5 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>R...</i>	TRAILER LICENSE PLATE NO. MD 0118422	DATE RECEIVED MONTH 8 DAY 5 YEAR 81	

GENERATOR STATE - MAILED BY GENERATOR

AR100056

DNREC
SOLID WASTE MGT. BRANCH
P.O. BOX 1401
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST

STATE OF DELAWARE

USE THIS MANIFEST FORM

PART A

DOCUMENT NO. DE-A- 01100

GENERATOR ICR ERM Millsboro 9407 Thornewood Dr. Clean America Baltimore, MD 21234	STATE ABILITY DE 19966 Mitchell Rd, Millsboro Baltimore, MD 21234	PHONE NO. (302) 934-8111 (301) 354-0751	EPA ID NO. DE D 0 4 3 9 5 8 3 8 8 MD D 0 8 2 6 0 4 5 5 4 TREATMENT, STORAGE OR DISPOSAL FACILITY Chem-Clear 1910 Russell St. Baltimore, MD (301) 685-3910 M D T 0 0 0 6 4 7 5 3 7
---	--	---	---

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. 1 OUT OF A TOTAL OF 7 THE FIRST MANIFEST DOCUMENT NO. IS

TO BE FILLED OUT BY GENERATOR

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS		GALLONS	CU YDS	POUNDS			
Contaminated cooling water waste flux	corrosive	UA1906	X			3500	X			1 TT	T F O O 1	
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so, I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Thomas E. [Signature]</i>	TITLE PETI	DATE TO BE SHIPPED 8-5-81	EXPECTED ARRIVAL DATE MONTH 8 DAY 5 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. MD 01 8422	DATE RECEIVED MONTH DAY YEAR	5

DISPOSER STATE - MAILED BY GENERATOR

Part A of copy 1, and copy 2 to the sites and retains Part A of copy 3 for

transporters, if more than two transporters are to be utilized, the Generator must complete an additional manifest form(s) and reference the first manifest document number on the additional manifest form(s).

No. 1 carries the remaining copies of along with the shipment.

copy of the shipment to the Designated or Transporter No. 2, Transporter No. certifies delivery of the shipment, obtains signature and certification of the TSD authorized representative or Transporter and retains copy 5 of the

8. If more than four hazardous wastes from the same generator are to shipped in the same shipment, additional manifests must be prepared by the generator.

copy of the shipment to the Designated or Transporter No. 2 signs and certifies the shipment, obtains the signature and of the TSD Facility's authorized representative and retains copy 6 of the

9. Note the above instructions hold for Interstate and Intrastate shipments. If there are any questions or clarification regarding the instructions please contact the DNREC, Solid Waste Mgt. Branch, P.O. Box 1401, Ed. Tatnall Bldg., Dover, DE 19901 or call (302) 736-4781.

AR100058

GENERATOR - Information in the Green Section to be completed by Waste Originator - See Back of Form

MANIFEST DOCUMENT NO. **A 72715**

Generator EPA I.D. Number **DE004395838**

Description of Waste **11** Select and Enter One Code from Description List Below

Generator Name **Clean America**

Acids Alkalies Aqueous Organic Waste Water Oils Inorganic Liquid

Generator Address **11111111111111111111**

Organic Liquid Mixed Chemical Liquid Inorganic Sludge

Phone No. **(301) 931-1111**

Organic Sludge Mixed Chemical Sludge Organic Solid

Shipment Date **03/05/81**

Inorganic Solid Mixed Chemical Solid

Hauler EPA I.D. No. **MD00382604554**

WASTE DESCRIPTION

Vehicle Certification Number **1111111111**

TYPE CODES

Facility EPA I.D. No. **MDT000647537**

DRUM CARTON BAG TANK TANK TRUCK

Facility Name & Address **Clean Clear Baltimore MD**

OTHER T-TONS T-TONS T-TONS T-TONS T-TONS

Facility Name (Destination) **Clean Clear Baltimore MD**

OTHER T-TONS T-TONS T-TONS T-TONS T-TONS

Shipping Name **Contaminated Cooling Water Waste Flux**

ENTER APPLICABLE CODE % BY WEIGHT MILLION/PALLET

US DOT HAZARD CLASS **corrosive**

P

SHIPMENT NUMBER	QUANTITY	WEIGHT	CONTAINER TYPE	EPA WASTE TYPE	CONCENTRATION
000001	1	300	T	11	10
TOTAL 0001 300 T 11 10					

Driver Signature **[Signature]** Date **03/05/81** **A 72715**

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type) **[Signature]** Signature of Agent **[Signature]** Generator's Emergency Telephone Number **302 934 9111**

HAULER - Information in the Pink Section to be completed by Waste Hauler - See Instructions on Back of Form No. **A 72715**

Company Name of Hauler **Clean America, Inc.**

Date Material Delivered to Facility **03/05/81**

Hauler EPA I.D. No. **MD00382604554**

Facility EPA I.D. No. **MDT000647537**

Vehicle Certification Number **81A0383**

Facility Name & Site (Destination) **Clean Clear Baltimore MD**

No. of Containers & Type **1** **DRUM**

Generator EPA I.D. No. **DE004395838**

Date Material Accepted by Hauler **03/05/81**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Name(s) of Vehicle Driver (Print) **[Signature]** Driver Signature **[Signature]**

YEAR AT THIS PERFORATION

FACILITY - Information in this Section to be completed by Facility - See Instructions on Back of Form No. **A 72715**

Facility Name & Site **[Signature]** Date Hazardous Waste Received **03/05/81**

PART B GENERATOR - MAILED BY TSD FACILITY

TO BE FILLED OUT BY TRANSPORTER

TRANSPORTER 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT

TRANSPORTER 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT

TRANSPORTER 3 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT

TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DEFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS.

GENERATOR EPA I.D. NO. **DE004395838** LABELED DATE OF DISPOSAL ON TREATMENT

TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE AND CERTIFICATION

DATE RECEIVED **03/05/81**

ART00059 DOCUMENT NO. DE-A 0111

IN CASE OF AN EMERGENCY OF 1000, IMMEDIATELY CALL THE NATIONAL HAZARDOUS CENTER (800) 424-8802 AND THE STATE (302) 834-6521

SOLID WASTE MGT. BRANCH
 P.O. BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **01117**

PART A

GENERATOR NAME R E&M Millsboro	SITE ADDRESS 19966 Mitchell Rd. Millsboro, DE	PHONE NO. (302) 934-8111	EPA I.D. NO. D.E.D.0.4.3.9.5.8.3.8.8
TRANSPORTER NO. 1 American Tank Truck	6350 Ordinance Pr. Road	(301) 636-1616	M.D.D.0.6.9.3.7.2.7.4.6
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY Chem-Clear	1910 Russell St. Baltimore, MD	(301) 683-3910	M.D.T.0.0.6.4.7.5.3.7

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1	Contaminated cooling water waste flux	corrosive	UA1906	X			5500	X			1 TT	T F 0 0 1	
2													
3													
4													

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.E., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James S. Shaffer</i>	TITLE EP III	DATE TO BE SHIPPED 8-5-81	EXPECTED ARRIVAL DATE MONTH 8 DAY 5 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Ralph J. Jones</i>	TRAILER LICENSE PLATE NO. MD A94548	STATE MD	DATE RECEIVED MONTH 8 DAY 5 YEAR 81

GENERATOR STATE - MAILED BY GENERATOR

AR100060

GENERATOR - Information in this Green Section to be completed by Waste Generator. See Back of Form.

Generator EPA I.D. Number: **DE 0043958388**

Facility Name: **Cham Clear Baltimore**

Address: **Cham Clear Baltimore, MD 21204**

Phone No.: **(301) 928-1111**

Shipment Date: **08-05-81**

Manifest Document No.: **A 72717**

Decision of Waste: **CL**

DESCRIPTION OF WASTE: **CL** Select and Enter One Code from Description Listed Below

HAZARDOUS WASTE CODES: **CL** Corrosive, **EX** Explosive, **FL** Flammable Liquid, **OX** Oxidizing, **PO** Poisonous, **SI** Irritant/Sensitizer, **TC** Toxic, **U** Unknown/Other

TYPE CODES: **00** DRUM, **01** LUMP, **02** BAG, **03** TANK, **04** TANK (small), **05** DRUM (small), **06** TANK TOWER, **07** OTHER

SHIPMENT TABLE:

SHIPPING NAME	US DOT HAZARD CLASS	HAZ. NO.	HAZ. CLASS	QUANTITY	CONTAINER TYPE	NO. CONTAINERS	WASTE TYPE	CONCENTRATION
Continued cooling water waste flux	Corrosive	01	3	0.3	TT	1	F	0.3
		8-5-81 TOTAL		0.3	TT	1		

Driver Signature: _____ Date: _____

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type): _____ Signature of Agent: _____ Generator's Emergency Telephone Number: **302 934-3811**

HAULER - Information in this Pink Section to be completed by Waste Hauler. See Instructions on Back of Form.

Company Name of Hauler: **American Tank Truck, Inc.**

Hauler EPA I.D. No.: **HD 000937A2746**

Vehicle Certification Number: **7A111**

Date Material Delivered to Facility: **08-05-81**

Facility Name & State (Destination): **Cham Clear Baltimore, MD**

Generator EPA I.D. No.: **DE 0043958388**

Date Material Accepted by Hauler: **08-05-81**

HAZARD CLASS: **CL**

CONTAINER TYPE: **TT**

NO. CONTAINERS: **1**

WASTE TYPE: **F**

CONCENTRATION: **0.3**

NAME(S) OF VEHICLE DRIVER (Print): _____ Driver Signature: _____

YEAR AT THIS PERFORMANCE: _____

FACILITY - Information in this Section to be completed by Facility. See Instructions on Back of Form.

Facility Name: **Cham Clear Baltimore**

State: **MD**

Facility Identification: **MRT B**

Date Hazardous Waste Received: **08-05-81**

GENERATOR - MAILED BY TSD FACILITY

TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT: _____ DATE DELIVERED: _____

TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT: _____ DATE DELIVERED: _____

TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION: _____

GENERATOR'S EPA I.D. NO.: **DE 0043958388**

HAZARDOUS WASTE CLASSIFICATION: **CL**

DATE RECEIVED: _____

DATE DELIVERED: _____

IN CASE OF AN EMERGENCY AT THIS FACILITY, IMMEDIATELY CALL THE NATIONAL RESPONSE CENTER (800) 424-8802 AND THE STATE (301) 634-4531.

DOCUMENT NO. DC-A-0111

SOLID WASTE MGT. BRANCH
P.O. BOX 1407
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **01118**

PART A

GENERATOR NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
NCR E&M Millsboro	DE 19966 Mitchell Rd, Millsboro,	(302) 934-8111	D.E.D.0.4.3.9.5.8.3.8.8
TRANSPORTER NO. 1	American Tank Tr.	(301) 636-1616	M.D.D.0.6.9.3.7.2.7.4.6
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY	1910 Russell St.	(301) 68393910	M.D.T.0.0.0.6.4.7.5.3.7
Chem-Clear	Baltimore, MD		

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
Contaminated cooling water waste flux	corrosive	HA1906	X			5700	X			1	TTT	F001

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Raymond Walker</i>	TITLE DEIC	DATE TO BE SHIPPED 8-5-81	EXPECTED ARRIVAL DATE MONTH 8 DAY 5 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Raymond Walker</i>	TRAILER LICENSE PLATE NO. AD A94732	DATE RECEIVED MONTH 8 DAY 5 YEAR 81	

GENERATOR STATE - MAILED BY GENERATOR

AR100062

SOLID WASTE MGT. BRANCH
 P.O. BOX 1401
 DOVER, DE. 12001

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **01107**

PART A

GENERATOR NAME W.R. EAM Millboro	SITE ADDRESS P O Box 607	PHONE NO. 302-934-0111	EPA I.D. NO. D E D 0 4 3 9 5 0 3 8 8
TRANSPORTER NAME Chem-Clear	ADDRESS 6350 Ordinance Pt. Rd. Baltimore, MD	PHONE NO. 301-636-1616	EPA I.D. NO. M D D 0 6 9 3 7 2 7 4 0
TREATMENT, STORAGE OR DISPOSAL FACILITY Chem-Clear	ADDRESS 1910 Russell Street	PHONE NO. 301-685-3910	EPA I.D. NO. M D D 0 0 0 6 4 4 7 5 3 7

IF MORE THAN ONE MANIFEST FORM IS FURNISHED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS			
1	contaminated cooling water		UN 1906		X			5500				1	TT	T F O O
2	waste flux	corrosive												
3														
4														

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Karen E. Shaffer</i>	TITLE FE III	DATE TO BE SHIPPED 8/5/81	EXPECTED ARRIVAL DATE MONTH 8 DAY 13 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>F. H. C. [Signature]</i>	TRAILER LICENSE PLATE NO. MD A945A2	DATE RECEIVED MONTH 8 DAY 5 YEAR 81	

GENERATOR STATE - MAILED BY GENERATOR

AR100064

GENERATOR - Information in this Green Section to be completed by Waste Generator - See Back of Form

MANIFEST DOCUMENT NO. **A 72719**

Generator EPA I.D. No. **0 D C D 4 3 9 5 8 3 3 8**

Description of Waste: **1** Select and Enter One Code from Description List Below

Shipment Date: **0 3 1 0 8 3 1**

WASTE DESCRIPTION: Inorganic Liquid, Organic Liquid, Inorganic Solid, Organic Solid, Mixed Chemical Liquid, Mixed Chemical Solid

Shipment Date: **0 3 1 0 8 3 1**

WASTE DESCRIPTION: Inorganic Liquid, Organic Liquid, Inorganic Solid, Organic Solid, Mixed Chemical Liquid, Mixed Chemical Solid

Hauler EPA I.D. No. **0 D D 0 6 9 3 7 2 7 4 6**

TYPE CODES: 01, 02, 03, 04, 05, 06, 07, 08, 09, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99

Vehicle Certification Number: **1 1 1 1 1 1 1 1 1 1**

OTHER MATERIALS: LIQUID, SOLID, TONS, POUNDS

SHIPPING NAME	US DOT HAZARD CLASS	HAZARD NUMBER	QUANTITY	CONTAINERS	CONCENTRATION
CONTAMINATED EXHAUST	corrosive	0 3 1 0 8 3 1			
WASTE WATER FLUX					

HAZARD NUMBER	QUANTITY	CONTAINERS	CONCENTRATION
0 3 1 0 8 3 1			
TOTAL			

Driver Signature: *F. R. Kline* Date: **0 3 1 0 8 3 1**

MANIFEST DOCUMENT NO. **A 72719**

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type): **0 3 1 0 8 3 1** Sign as of Agent: **0 3 1 0 8 3 1** Generator's Emergency Telephone Number: **0 3 1 0 8 3 1**

HAULER - Information in this Pink Section to be completed by Waste Hauler - See Instructions on Back of Form NO. **A 72719**

Company Name of Hauler: **American Tank Truck**

Date Material Delivered to Facility: **0 3 1 0 8 3 1**

Hauler EPA I.D. No. **0 D D 0 6 9 3 7 2 7 4 6**

Facility EPA I.D. No. **0 D F 0 0 6 4 7 5 3**

Vehicle Certification Number: **1 1 1 1 1 1 1 1 1 1**

Facility Name & State (Destination): **Chase Clean Baltimore, MD**

Generator EPA I.D. No. **0 D C D 4 3 9 5 8 3 3 8**

Generator EPA I.D. No. **0 D C D 4 3 9 5 8 3 3 8**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Signature of Vehicle Driver (Print): **F. R. KLINE** Date: **0 3 1 0 8 3 1**

FACILITY - Information in this Section to be completed by Facility - See Instructions on Back of Form NO. **A 72719**

Facility Name & State: **Chase Clean Baltimore, MD**

Date Hazardous Waste Received: **0 3 1 0 8 3 1**

PAR B GENERATOR - MAILED BY TSD FACILITY

TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <td>MONTH DAY YEAR</td>	MONTH DAY YEAR
TRANSPORTER NO. 3 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT <td>MONTH DAY YEAR</td>	MONTH DAY YEAR
TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASON FOR AND DISPOSITION OF REJECTED MATERIALS <td>MONTH DAY YEAR</td>	MONTH DAY YEAR
GENERATOR EPA I.D. NO. <td>EXPECTED DATE OF DISPOSAL OR TREATMENT</td>	EXPECTED DATE OF DISPOSAL OR TREATMENT
TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE AND CERTIFICATION <td>DATE RECEIVED</td>	DATE RECEIVED

DOCUMENT NO. DE-A **01107**

SOLID WASTE MGT. BRANCH
P.O. BOX 1401
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **15632**

PART A

GENERATOR NAME E&M Millboro	SITE ADDRESS Mitchell Rd. Millboro, DE	PHONE NO. 301-934-8111	EPA I.D. NO. ED043958388
TRANSPORTER NO. 1 TRUCK	6350 Ordinance Pt. Rd.	301-636-1616	MD0069372740
TREATMENT, STORAGE OR DISPOSAL FACILITY Chem Clear	1910 Russell ST	301-683-3910	000647537
IF MORE THAN ONE MANIFEST FORM IS SUBMITTED, FILL OUT THE FOLLOWING INFORMATION.			
THIS FORM IS NO. <input type="checkbox"/> OUT OF A TOTAL OF <input type="checkbox"/>		THE FIRST MANIFEST DOCUMENT NO. IS <input type="checkbox"/>	

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS				CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS	POUNDS			
1	contaminated cooling water waste flux	corrosive	HA 1906	x			5700					1 TT	T	001
2														
3														
4														

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James Chipman</i>	TITLE EB III	DATE TO BE SHIPPED 8-6-81	EXPECTED ARRIVAL DATE MONTH DAY YEAR
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Lawman</i>	TRAILER LICENSE PLATE NO. AD A94748	DATE RECEIVED MONTH DAY YEAR 8 6 81	

GENERATOR STATE - MAILED BY GENERATOR

AR100066

GENERATOR - Information in this Green Section to be completed by Waste Originator. See Back of Form. **MANIFEST DOCUMENT NO. A 75353**

Generator EPA I.D. Number: **DE0043959389**
 Generator Name: **CHEN CLEAR BALTIMORE**
 Address: **FILLSIDE RD BALTIMORE MD 21286**
 Phone No: **302-33-3111**
 Shipment Date: **080681** (M/D/Y)

Department of Waste: **CLY**
 Select and Enter One Code from Description Listed Below:
 Sludges Liquids Aqueous
 Cleaning Waste Oils Inorganic Liquid
 Organic Liquid Mixed Chemical Liquid Inorganic Solid
 Organic Sludge Mixed Chemical Sludge Organic Solid
 Inorganic Solid Mixed Chemical Solid

Hauler EPA I.D. No.: **MD0069372746**
 Vehicle Certification Number: **1-1-1-1**
 Facility EPA I.D. No. (Destination): **MDT000647537**
 Facility Name & Address: **CHEN CLEAR BALTIMORE MD**

TYPE CODES
 01 DRUM
 02 TANK
 03 BOX
 04 TANK (OVER)
 05 TANK (UNDER)
 06 TANK TRUCK
 07 OTHER

ENTER APPLICABLE CODE
 0 BY WEIGHT
 1 BY VOLUME

SHIPPING NAME PROPER US DOT	MS DOT HAZARD CLASS	UN NUMBER	HAZARD CLASS	QUANTITY	UNIT	CONTAINER CODE	ORIG. STATE	EST. STATE	WASTE CODE	CONCENTRATION
Contaminated cooling wash water flux	CORROSIVE	VA1906L				01	MD	MD	01	10
TOTAL										

Driver Signature: _____ Date: _____
 THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type): _____
 Signature of Agent: _____
 YEAR AT THIS PERFORMANCE: _____
 Generator's Emergency Telephone Number: **302 934-8111**

HAULER - Information in this Pink Section to be completed by Waste Hauler. See Instructions on Back of Form. **NO. A 75353**

Company Name: **AMERICAN TANK TRUCK**
 Hauler EPA I.D. No.: **MD0069372746**
 Vehicle Certification Number: **1-1-1-1**
 Date Material Delivered to Facility: **080681**
 Facility EPA I.D. No.: **MDT000647537**
 Facility Name & State (Destination): **CHEN CLEAR BALTIMORE MD**
 Generator EPA I.D. No.: **DE0043959389**
 Date Material Accepted by Hauler: _____

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Name(s) of Vehicle Driver (Print): _____
 Driver Signature: _____
 YEAR AT THIS PERFORMANCE: _____

FACILITY - Information in this Section to be completed by Facility. See Instructions on Back of Form. **NO. A 75353**
 (DISPOSAL/TREATMENT/STORAGE)
 Facility Name: _____
 Date Hazardous Waste Received: _____

PART B GENERATOR - MAILED BY TSD FACILITY

TO BE FILLED OUT BY TRAILER DRIVER

TRAILER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
TRAILER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
TRAILER NO. 3 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED

TO BE FILLED OUT BY TSD FACILITY

THE TREATMENT, STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS.	HAZARDOUS WASTE RECEIVED
GENERAL TREATMENT, STORAGE OR DISPOSAL FACILITY SIGNATURE AND CERTIFICATION	EXPECTED DATE OF DISPOSAL OR TREATMENT
IN CASE OF AN EMERGENCY OR LOSS, IMMEDIATELY CALL THE NATIONAL HAZARDOUS WASTE CENTER (800) 424-9302 AND THE STATE (302) 834-4333	DATE RECEIVED

DOCUMENT NO. DE-A 1563

JUNEL
SOLID WASTE MGT. BRANCH
P.O. BOX 1411
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **15631**

PART A

GENERATOR NAME WOR E&M Millsboro	SITE ADDRESS Mitchell Rd., Millsboro, DE	PHONE NO. 301-934-3111	EPA I.D. NO. DED 04395838
TRANSPORTER NO. 1 American Tank Truck	6350 Ordiance Pt. Rd.	301-636-1610	MD D 0 0 6 9 3 7 2 7 4 6
TRANSPORTER NO. 2 (IF ANY)	Curtis Bay, MD		
TREATMENT, STORAGE OR DISPOSAL FACILITY Chem Clear	1910 Russell St.	301-683-3010	MD T 0 0 0 6 4 7 5 3 7
Baltimore, MD			

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS				CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS		GALLONS	CU YDS	POUNDS	TONS			
1	contaminated cooling water waste flux	corrosive	UA 1000	X			500	X				1 TTT	F001	
2														
3														
4														

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Lawrence P. ...</i>	TITLE IEITC	DATE TO BE SHIPPED 8-6-81	EXPECTED ARRIVAL DATE MONTH 9 DAY 6 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Robert J. ...</i>	TRAILER LICENSE PLATE NO. MD A94523	DATE RECEIVED MONTH 8 DAY 28 YEAR 81	

GENERATOR STATE - MAILED BY GENERATOR

AR100068

GENERATOR - Information in the Green Section to be completed by Waste Originator - See Back of Form

MANIFEST DOCUMENT NO. **A 83075**

Generator EPA I.D. Number: **00043958388**

Description of Waste: **044** Select and Enter One Code from Description Listed Below:
 01 Organic Liquid
 02 Inorganic Liquid
 03 Organic Solid
 04 Mixed Chemical Liquid
 05 Inorganic Solid
 06 Mixed Chemical Solid

Generator Name: **GEN CLEAR BALTIMORE**
 Address: **1000 ...**
 Phone No.: **301-221-7111**

Shipment Date: **09-06-81**

Hauler EPA I.D. No.: **HD0062372746**

Vehicle Certification Number: **...**

Facility EPA I.D. No.: **HDTO0064753**
 Facility Name & Address: **GEN CLEAR BALTIMORE MD**

TYPE CODES

(SEE INSTRUCTIONS ON BACK OF FORM)

01 ORGANIC LIQUID
 02 INORGANIC LIQUID
 03 ORGANIC SOLID
 04 MIXED CHEMICAL LIQUID
 05 INORGANIC SOLID
 06 MIXED CHEMICAL SOLID

ENTER APPLICABLE CODE BY WEIGHT OR VOLUME

04

SHIPMENT NAME PROPER US DOT	US DOT HAZARD CLASS	UN OR UN NUMBER	QUANTITY	CONTAINER TYPE	HAZ. TYPE	CONCENTRATION
Contaminated cooling water filter	CORROSIVE	UN 1800
...
TOTAL	

Driver Signature: _____ Date: _____

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type): _____ Signature of Agent: _____

HAULER - Information in this Pink Section to be completed by Waste Hauler - See Instructions on Back of Form

Company Name: **AMERICAN TANK TRUCK**

Hauler EPA I.D. No.: **HD0062372746**

Vehicle Certification Number: **...**

No. of Containers & Type: **01 TT**

Date Material Accepted by Hauler: **...**

Date Material Delivered to Facility: **09-06-81**

Facility EPA I.D. No.: **HDTO0064753**

Facility Name & State (Destination): **GEN CLEAR BALTIMORE MD**

Generator EPA I.D. No.: **00043958388**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Name(s) of Vehicle Driver (Print): _____ Driver Signature: _____

FACILITY - Information in this Section to be completed by Facility - See Instructions on Back of Form

Facility Name & State: _____ Date Hazardous Waste Received: **...**

Facility Name & State: _____ Date of this Performance: _____

PART B GENERATOR - MAILED BY TSD FACILITY

TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT	DATE RECEIVED
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DEFICIENCIES IN THIS MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS.	HANDLING METHOD
GENERATOR EPA I.D. NO.	LABELED DATE OF DISPOSAL OR TREATMENT
TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE AND CERTIFICATION	DATE RECEIVED

IN CASE OF AN EMERGENCY FOR HUMAN SAFETY, CALL THE NATIONAL HAZARDOUS CENTER (800) 424-9302 AND THE STATE (301) 814-4511

DOCUMENT NO. DE-A-1563

SOLID WASTE MGT. BRANCH
P.O. BOX 1401
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A. **15633**

PART A

GENERATOR NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
CRISP Millboro Mitchell Rd. Millboro, DE 301-934-8111	6350 Ordinance Pt. Rd. Curtis Bay, MD 301-636-1616		DEB043958388
TRANSPORTER NO. 1			
American Tank Truck			MD0069372746
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY	1910 Russell St. Baltimore, MD 301-682-2010		MD0069372746
Chem Clear			

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
Contaminated cooling water waste flux	corrosive	UA 1900	X			570	X			I I I I I	F O O I	

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.E. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James S. Walker</i>	TITLE <i>D.E. III</i>	DATE TO BE SHIPPED <i>6-81</i>	EXPECTED ARRIVAL DATE MONTH _____ DAY _____ YEAR _____
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Raymond Walker</i>	TRAILER LICENSE PLATE NO. <i>MD A 84127</i>	STATE <i>MD</i>	DATE RECEIVED MONTH <i>8</i> DAY <i>6</i> YEAR <i>81</i>

GENERATOR STATE - MAILED BY GENERATOR

AR100070

GENERATOR - Information in this Green Section to be completed by Waste Generator - See Back of Form **MANIFEST DOCUMENT NO. A 7535**

Generator E.I.D. Number: **DE0043958388**

Generator Name: **CHICK CLEAR BALTIMORE**

Generator Address: **11111111111111111111**

Phone No.: **302-34-0111**

Shipment Date: **08/06/81**

Hauler EPA I.D. No.: **MD0069372746**

Vehicle Certification Number: **1-1-1**

Facility EPA I.D. No. (Destination): **MDT000647537**

Facility Name & Address: **CHICK CLEAR BALTIMORE MD**

WASTE DESCRIPTION: **CONTAMINATED COOLING WATER WATER FLUX CORROSIVE**

TYPE CODES: **01** (DRUM), **01** (TANK TRUCK)

SPILLING NAME	MSDS HAZARD CLASS	HAZARDOUS NUMBER	QUANTITY	UNIT	CONTAINERS	CONC.	CONCENTRATION
CONTAMINATED COOLING WATER WATER FLUX	CORROSIVE	1	1	001	1	1	1
		TOTAL		1	1	1	1

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Signature: _____ Date: _____

Name of Authorized Agent (Print or Type): _____ Title: _____ Generator's Emergency Telephone Number: _____

HAULER - Information in this Pink Section to be completed by Waste Hauler - See Instructions on Back of Form NO. **A 7535**

Company Name of Hauler: **AMERICAN TANK TRUCK**

Hauler EPA I.D. No.: **MD0069372746**

Vehicle Certification Number: **1-1-1**

Date Material Delivered to Facility: **08/06/81**

Facility EPA I.D. No.: **MDT000647537**

Facility Name & State (Destination): **CHICK CLEAR BALTIMORE MD**

Date Material Accepted by Hauler: **08/06/81**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Name(s) of Vehicle Driver (Print): _____ Driver Signature: _____

FACILITY - Information in this Section to be completed by Facility - See Instructions on Back of Form NO. **A 7535**

Facility Name: _____ Date Hazardous Waste Received: _____

PART B GENERATOR - MAILED BY TSD FACILITY

TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT	DATE RECEIVED
TRANSPORTER NO. 3 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
THE ATMENT STORAGE OR DISPOSAL FACILITY (INDICATION OF ANY OF THE INCL'S IN TWELVE MONTH LIST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS)	HANDLED METHOD
GENERATOR EPA ID NO.	EXPECTED DATE OF DISPOSAL OR THE ATMENT
THE ATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE AND CERTIFICATION	DATE RECEIVED

In case of an emergency, you should immediately call the National Response Center at 1-800-424-9333 and the State (302) 834-4533

AR10007 DOCUMENT NO. DE-A 15633

DNREC
SOLID WASTE MGT. BRANCH
P.O. BOX 1401
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
USING A BALL POINT PEN.

DOCUMENT NO. DE-A-15630

PART A

GENERATOR NAME R. E. M. Nilleborn	SITE ADDRESS Mitchell Road Nilleborn, DE 9407 Thornewood Dr. Baltimore, MD	PHONE NO. 302-934-8111	EPA I.D. NO. DE D 0 4 3 9 5 8 3 8 8
TRANSPORTER NO. 1 Clean America	TRANSPORTER NO. 2 (IF ANY)	301-354-0751	MD D 0 8 2 6 0 4 5 5 4

TREATMENT, STORAGE OR DISPOSAL FACILITY Chem Clean	1910 Russell St. Baltimore, MD	301-685-3911	MD D 0 0 6 4 7 5 3 7
--	---	---------------------	-----------------------------

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1	contaminated cooling water waste flux	corrosive	UA1906	X				X			L	TT T	F0 0 1
2													
3													
4													

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i. e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Jamie...</i>	TITLE RA III	DATE TO BE SHIPPED 8-6-91	EXPECTED ARRIVAL DATE MONTH DAY YEAR
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>R. M...</i>	TRAILER LICENSE PLATE NO. 4D A18420	STATE MD	DATE RECEIVED MONTH DAY YEAR 8 6 91

GENERATOR STATE - MAILED BY GENERATOR

ARI00072

GENERATOR - Information in the Green Section to be completed by Waste Originator - See Back of Form

MANIFEST DOCUMENT NO. **A 72716**

Generator EPA I.D. Number: **MD000647537**

Description of Waste: **1** Select and Enter One Code from Description List Below

Shipment Date: **08 06 81**

WASTE DESCRIPTION: **1** (Solid) **1** (Liquid) **1** (Sludge) **1** (Other)

Hauler EPA I.D. No. **MD00082604554**

Vehicle Certification Number: **81A0393**

Facility EPA I.D. No. (Destination): **MDT000647537**

Facility Name & Address: **Clean Clear Baltimore**

Shipping Name: **Contaminated cooling water wash flux**

TYPE CODES: **01** (Solid) **01** (Liquid) **01** (Sludge) **01** (Other)

SHIPMENT NO.	HAZARDOUS CLASS	HAZARDOUS CODE	CONTAINER	WASTE TYPE	REGENERATION
1	Corrosive	1	1	1	1
TOTAL: 1					

Driver Signature: _____ Date: **08 06 81**

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS.

Name of Authorized Agent (Print or Type): _____ Signature of Agent: _____ Generator's Emergency Telephone Number: _____

HAULER - Information in the Pink Section to be completed by Waste Hauler - See Instructions on Back of Form

Company Name: **Clean America, Inc.**

Date Material Delivered to Facility: **08 06 81**

Hauler EPA I.D. No.: **MD00082604554**

Facility EPA I.D. No.: **MDT000647537**

Vehicle Certification Number: **81A0393**

Facility Name & State (Destination): **Clean Clear Baltimore MD**

Date Material Accepted by Hauler: **08 06 81**

Generator EPA I.D. No.: **MD000647537**

I HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Name(s) of Vehicle Driver (Print): _____ Driver Signature: _____

FACILITY - Information in the Section to be completed by Facility - See Instructions on Back of Form

Facility Name: _____ Date Hazardous Waste Received: **08 06 81**

Generator EPA I.D. No.: **MD000647537**

PART B GENERATOR - MAILED BY TSD FACILITY

TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
_____	MONTH: 08 DAY: 06 YEAR: 81
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT	DATE RECEIVED
_____	MONTH: 08 DAY: 06 YEAR: 81
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED
_____	MONTH: 08 DAY: 06 YEAR: 81
TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF APPROPRIATE OFFICES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASON(S) AND DISPOSITION OF REJECTED MATERIALS.	HANDLING METHOD
_____	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/>
GENERATOR EPA I.D. NO.	EXPECTED DATE OF DISPOSAL OR TREATMENT
MD000647537	MONTH: 08 DAY: 06 YEAR: 81
TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE AND CERTIFICATION	TITLE
_____	_____
DATE RECEIVED	DOCUMENT NO. DE-A
MONTH: 08 DAY: 06 YEAR: 81	15630

In case of an emergency at time, immediately call the National Response Center (800) 424-9302 and the State (301) 834-4233

Betz • Converse • Murdoch • Inc.

APPENDIX 6

MAP OF MONITORING WELLS AND PRODUCTION WELLS

AR100074

EPA REGION III
SUPERFUND DOCUMENT MANAGEMENT SYSTEM

DOC ID 152015
PAGE # AB100075

IMAGERY COVER SHEET
UNSCANNABLE ITEM

SITE NAME NCR millsboro

OPERABLE UNIT 00

ADMINISTRATIVE RECORDS- SECTION 1 VOLUME

REPORT OR DOCUMENT TITLE Hazardous Waste
Investigation

DATE OF DOCUMENT 10/1/81

DESCRIPTON OF IMAGERY Surveyor map

NUMBER AND TYPE OF IMAGERY ITEM(S) 1 Oversized Map

Betz • Converse • Murdoch • Inc.

APPENDIX 7
FIELD LOGS

AR100076



Batz • Converse • Murdoch • Inc
 One Plymouth Meeting Mall
 Plymouth Meeting, Penna. 19402

INSPECTORS DAILY REPORT

PROJECT <u>Wall Castregeaster Co</u>		PROJECT NO. <u>11529-05</u>
LOCATION <u>Millboro Del.</u>		REPORT NO. <u>1</u>
Contract Time _____ Date <u>8 Sept 1981</u> Days Elapsed _____ Day <u>M</u> <u>W</u> <u>Th</u> <u>F</u> <u>S</u> Extensions _____ Weather <u>Clear</u> <input checked="" type="checkbox"/> <u>Overcast</u> <input type="checkbox"/> <u>Rain</u> <input type="checkbox"/> <u>Mist</u> <input type="checkbox"/> <u>Hot</u> <input checked="" type="checkbox"/> <u>Cold</u> <input type="checkbox"/> <u>Warm</u> <input type="checkbox"/> <u>Foggy</u> Days Left _____ Site Condition <u>Clear</u> <input checked="" type="checkbox"/> <u>Muddy</u> <input type="checkbox"/> <u>Dusty</u> <input type="checkbox"/> <u>Other</u> _____ Temperature Range <u>76-80</u>		
CONTRACTORS LABOR FORCE	LOCATION SKETCH	WORK PERFORMED
FOREMAN <u>1-</u> OPERATOR <u>1-</u> LABORERS: <u>2-</u> <u>1- DRIVER</u> <u>A hr</u>	<u>Atlantic Coast Envrn Co</u> <u>Started operations 11:00 AM</u> <u>Digging to locate extent of material</u> <u>Excavated 20' ± to North end of Sledge.</u> <u>Covered Contaminated Area with Plastic.</u> <u>Stopped at 3:30 PM</u> <u>Progress Very Slow</u> <u>4 hrs Equip + Labor</u> <u>+ 2 hrs Travel</u>	
EQUIPMENT USED:		
<u>1-Pippin</u> <u>1-2-Containers</u>		
MATERIAL USED:		
ITEM	AMOUNT	
		COMMENTS
		<u>7:00 → 3:20 - Spins</u> <u>125 m. lca</u> <u>Supper 4:45</u> <u>Home 2:1:37</u>
PHONE CALLS _____		VISITORS _____
INSPECTOR <u>10100077</u>		



Betz • Converse • Murdoch • Inc
One Plymouth Meeting Mall
Plymouth Meeting Penna 19062

INSPECTORS DAILY REPORT

PROJECT Nate. Cash register Co. PROJECT NO. 1529-05
LOCATION Millbourne, Del. REPORT NO. 2

Contract Time _____ Date 9 Sept 1981
Days Elapsed _____ Day M T ~~W~~ Th F S
Extensions _____ Weather Clear Overcast _____ Rain _____ Mist _____ Hot Cold _____ Warm _____ Foggy _____
Days Left _____ Site Condition Clear Muddy _____ Dusty _____ Other _____
Temperature Range 60-70

CONTRACTORS LABOR FORCE		LOCATION SKETCH	WORK PERFORMED
FOREMAN <u>1</u>		<u>Atlantic Coast Envir. Co.</u> operator only Loading Specimen Foreman on Job Site 9:20 am Pippin down - (Hyd. Unit) 10:00 am Back in operation	8:20 am Digging 8:40 3 1/2 hrs
OPERATOR <u>1</u>			
LABORERS: _____			

EQUIPMENT USED:		Cleaned Excavation on North End. Working in South end Took Samples of Bentonite & Sludge to be checked by Contractor Stopped 4:00 pm 3 1/2 hrs Equip + labor (1 man eff.) + 2 hrs Travel Cleaned out all Sludge Traces checking bentonite layer to see if it needs Rem. with	COMMENTS 2:45 → 4:15 work Review 2:1- Supply 15:00
MATERIAL USED:			
ITEM	AMOUNT		
PHONE CALLS _____		VISITORS _____	INSPECTOR <u>J. R. [Signature]</u>



Belz • Converse • Murdoch • Inc
One Plymouth Meeting Mall
Plymouth Meeting, Penna 19062

INSPECTORS DAILY REPORT

PROJECT Wate Constructors Co PROJECT NO. 1529-05
LOCATION Millboro, Del REPORT NO. 3

Contract Time _____ Date 10 Sept 1971
Days Elapsed _____ Day M T W Th F S
Extensions _____ Weather Clear Overcast Rain Mist Hot Cold Warm X Foggy
Days Left _____ Site Condition Clear Muddy Dusty Other
Temperature Range 53° - 76°

CONTRACTORS LABOR FORCE		LOCATION SKETCH	WORK PERFORMED	
FOREMAN <u>1-</u> OPERATOR <u>1-</u> LABORERS: <u>1-</u> <u>7 1/2 hr</u>		<u>Atlantic Coast Lbr Co.</u> <u>Container on Job Provision</u> <u>Supervisor + operator 8:10 AM</u> <u>Moved 2 Loaded Containers</u> <u>Pippin started work @ 8:45 AM Loading Containers</u> <u>Upon checking Excavation another pocket of sludge was uncovered - Digging sludge at South end of hole - Stopped Air Pk. Lost approx 1 hour production due to mechanical trouble</u> <u>Ch hrs Equip + Labor 7 1/2 hr + 2 hrs Travel</u> <u>Surveyors Run tapes on Wells & Excavation will check Elevations on Monday</u>	<u>8:45 AM Loading Containers</u>	
EQUIPMENT USED:			<u>1 - Pippin Chrs</u> <u>5 - Containers</u>	<u>Another pocket of sludge was uncovered - Digging sludge at South end of hole - Stopped Air Pk. Lost approx 1 hour production due to mechanical trouble</u>
MATERIAL USED:			<u>Ch hrs Equip + Labor 7 1/2 hr + 2 hrs Travel</u>	<u>Another pocket of sludge was uncovered - Digging sludge at South end of hole - Stopped Air Pk. Lost approx 1 hour production due to mechanical trouble</u>
ITEM	AMOUNT		COMMENTS	
<u>Brought in 1 More Container to hole No. 6</u>			<u>7.75 → 4.15 - 5 hrs</u> <u>Room 2 1/2 hr</u> <u>5.75</u>	

PHONE CALLS _____ VISITORS _____ INSPECTOR AG [Signature]



Betz • Converse • Murdoch • Inc
One Plymouth Meeting Mall
Plymouth Meeting, Penna 19362

INSPECTORS DAILY REPORT

PROJECT W&L Cash Register Co. PROJECT NO. 2529-05
LOCATION Millicane, Del REPORT NO. 7

Contract Time _____ Date 11 Sept. 1981
Days Elapsed _____ Day M T W Th (F) S
Extensions _____ Weather Clear Overcast _____ Rain _____ Mist _____ Hot _____ Cold _____ Warm Foggy _____
Days Left _____ Site Condition Clear Muddy _____ Dusty _____ Other _____
Temperature Range 65 - 75

CONTRACTORS LABOR FORCE	LOCATION SKETCH	WORK PERFORMED
-------------------------	-----------------	----------------

FOREMAN 1
OPERATOR 1
LABORERS: 1
6 1/2 hrs

Atlantic Coast Env. Co.

Started Digging 8:00 AM - South end.
11:00 AM Carefully Impacted Pit - all
Traces of Sludge removed

EQUIPMENT USED:
New Pippin on 600
4 hrs

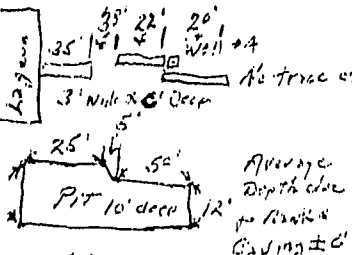
Pippin cleaning up + loading Containers.
Finished 12:00 Noon

Mr. Rosenberger & Mr. Callahan Advised that
it was OK to backfill Pit w/ #1 Select Fill.
to be backfilled Monday
Finished 2:45 PM

MATERIAL USED:

ITEM	AMOUNT

Mail Copies of Reports to:-
Herbert D Rosenberger
First Nat'l Bank of Md.
P.O. Box 1476
Bethesda, Md 20803



Fill material in Trenches

COMMENTS

7:45 → 5:15 - 7 hrs

2 Samples Taken - Bottom Trench + Ground

PHONE CALLS _____

VISITORS
H D Rosenberger

INSPECTOR
[Signature]



Bolz • Converse • Murdoch • Inc
One Plymouth Meeting Mall
Plymouth Meeting, Penna. 19462

INSPECTORS DAILY REPORT

PROJECT Natl. Cshregator Co. PROJECT NO. AS24-05
 LOCATION B. Williams - Del. REPORT NO. 5

Contract Time _____ Date 14 Sept. 1981
 Days Elapsed _____ Day W T W Th F S
 Extensions _____ Weather Clear Overcast Rain Mist Hot Cold Warm Foggy
 Days Left _____ Site Condition Clear Muddy Dusty Other _____
 Temperature Range 60 - 80

CONTRACTORS LABOR FORCE	LOCATION SKETCH	WORK PERFORMED
-------------------------	-----------------	----------------

FOREMAN <u>1</u>	<p><u>Atlantic Coast Envtl. Co.</u></p> <p><u>Hauling in 42 vol. Backfill & Filling Pit</u></p> <p><u>M. L. Joseph Co. Backfill - 12 Loads</u></p> <p>1 - Containers Removed</p> <p>1 - " " "</p> <p>1 - " " "</p> <p>1 - " " "</p>	<p>Piping -</p> <p>7:30 → 10:30; 11:20 → 3:40</p>
OPERATOR <u>1</u>		
LABORERS: <u>1</u>		

EQUIPMENT USED:	WORK PERFORMED
<p><u>Piping - 5 1/2"</u></p>	<p>15 @ 40 8' in PM</p> <p>15 @ 40 2 1/2' in PM</p> <p>15 @ 40 2' in PM</p> <p>15 @ 40 3' in PM</p> <p>Finished 4:00 PM</p> <p>Filling Trenches at layout by U.C.R. & Well #5 Trenches</p>

MATERIAL USED:		COMMENTS
ITEM	AMOUNT	
<p><u>1 - Containers</u></p> <p><u>1 - 10' x 10' -</u></p>	<p>1 wall #5</p> <p>15' x 10'</p> <p>3'</p>	<p>8:30 → 9:00 → 9:45</p> <p>Room #23-32</p> <p>Supply 5:00</p>
	<p>6' Deep No Trace of fill materials in Trenches</p>	

PHONE CALLS	VISITORS	INSPECTOR
		<u>J. E. ...</u>



Bolz • Converse • Murdoch • Inc
One Plymouth Meeting Mall
Plymouth Meeting Penna. 19362

INSPECTORS DAILY REPORT

PROJECT Natl Cashregister Co PROJECT NO. AS 29-05
LOCATION Millsboro Del REPORT NO. 6

Contract Time _____ Date 15 Sept 1971
Days Elapsed _____ Day M D W Th F S
Extensions _____ Weather Clear Overcast Rain Mist Hot Cold Warm Foggy
Days Left _____ Site Condition Clear Muddy Dusty Other _____
Temperature Range 63 → 92

CONTRACTORS LABOR FORCE	LOCATION SKETCH	WORK PERFORMED
FOREMAN <u>1</u>	<u>Atlantic Coast. Env.</u>	<u>Fin. Am.</u>
OPERATOR <u>1</u>	<u>1 - Cont. Removed</u>	<u>8:40 - 15 G 40</u>
LABORERS: <u>1</u> <u>8 hrs</u>	<u>1 - " "</u>	<u>8:50 - 15 "</u>
	<u>1 - " "</u>	<u>9:20 - 15 "</u>
	<u>1 - " "</u>	<u>1:00 PM - 15 "</u>
	<u>1 - " "</u>	<u>1:55 - 15 "</u>
	<u>1 - " "</u>	<u>3:15 - 15 G 41</u>
	<u>1 - " "</u>	<u>4:15 - 15 "</u>
EQUIPMENT USED:	<u>1 - " "</u>	<u>4:20 - 15 "</u>
<u>Pippin 8:00 AM</u> <u>4:30 PM</u> <u>8 hrs</u>	<u>Total 12</u>	
MATERIAL USED:	<u>1 - Lead Fill - 11:10 AM</u>	<u>Completed Breakfil at Pt</u>
	<u>1 - " " 11:55</u>	<u>+ Dressing Area</u>
	<u>Total 14 Lead 2.10 G 40</u>	
	<u>Finished 4:20 PM</u>	
ITEM	AMOUNT	
<u>2 - Containers 2x4</u>	<u>Bin. Am.</u>	
<u>7 to 12</u>		
<u>1 - Container 2x4</u>	<u>11 PM</u>	
<u>1 - " 1 2:15</u>		
<u>Total 14</u>		
		COMMENTS
		<u>7:00 → 4:30 - 9 hrs</u>
		<u>Rock 2:13</u>
		<u>Sign 5:00</u>

PHONE CALLS _____ VISITORS _____ INSPECTOR [Signature]



Beltz • Converse • Muldoch • Inc
One Plymouth Meeting Mall
Plymouth Meeting, Penna 19462

INSPECTORS DAILY REPORT

PROJECT Natl. Conference C PROJECT NO. 4529-05
LOCATION Mt. Airy Del. REPORT NO. 7

Contract Time _____ Date 16 Sept 1981
Days Elapsed _____ Day M T W Th F S
Extensions _____ Weather Clear Overcast Rain X Mist Hot Cold Warm X Foggy
Days Left _____ Site Condition Clear X Muddy Dusty Other _____
Temperature Range 70 → 80

CONTRACTORS LABOR FORCE		LOCATION SKETCH	WORK PERFORMED
FOREMAN _____		<u>Atlantic Coast Line C</u> <u>1 - Container Removed - 2:30 PM</u>	
OPERATOR _____			
LABORERS: _____			
EQUIPMENT USED: _____			
MATERIAL USED:		<u>Conference w/ Atlantic Coast Line - Agree to pay for Dispatch by NCR Printer</u>	<u>8:00 → 3:00 PM</u> <u>6 1/2 hrs</u>
ITEM	AMOUNT		
<u>1 - Cont. Del.</u>	<u>9:30 AM</u>		
PHONE CALLS _____		VISITORS _____	INSPECTOR _____ <u>AR000000</u>

Betz • Converse • Murdoch • Inc.

APPENDIX 8

MANIFEST INFORMATION - OLD WASTE AREA CLEANUP

AR100004

NCR

NCR Corporation

Engineering and Manufacturing-Millsboro
Post Office Box 607
Millsboro, Delaware 19966

September 21, 1981

Mr. Jay Motwani
Solid Waste
Division of Environmental Control
P.O. Box 1401
Edward Tatnell Building
Dover, DE 19901

Dear Mr. Motwani:

Attached are the following Delaware manifest "Generator State"
blue sections for your records.

<u>Document Number</u>	<u>Date</u>
DE-A	
15515	9-14-81
15522	9-14-81
15519	9-14-81
15518	9-14-81
15521	9-15-81
15517	9-15-81
15516	9-15-81
15374	9-15-81
15529	9-15-81
15528	9-15-81
15526	9-15-81
15527	9-15-81
15525	9-16-81
15524	9-17-81
15380	9-17-81
15523	9-17-81

AR100085

Mr. Jay Motwani
September 21, 1981

Page 2

<u>Document Number</u>	<u>Date</u>
15381	9-18-81
15612	9-18-81
15382	9-18-81
15611	9-21-81

If you have any questions, please do not hesitate to contact me.

Sincerely,

Lori Maslowski

Lori Maslowski, Buyer
Purchasing Department

LJM/bp

AR100086

LID WASTE MGT. BRANCH
 BOX 1401
 VER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
 USING A BALL POINT PEN.

HT A

DOCUMENT NO. DE-A- **15515**

GENERATOR NAME CSC Millisboro Atlantic Coast TRANSPORTER NO. 1 (IF ANY)	GENERATOR SITE ADDRESS P.O. Box 607 Millisboro, DE 19966 P.O. Box 114 Dover, DE 19901	GENERATOR PHONE NO. 302-934-8111 302-678-8232	EPA I.D. NO. DE 0 0 4 3 9 5 8 3 0 0 DE 0 0 0 0 7 9 6 3 0 0
TREATMENT, STORAGE OR DISPOSAL FACILITY NAME Atlantic Coast	TREATMENT, STORAGE OR DISPOSAL FACILITY ADDRESS P.O. Box 114 Dover, DE 19901	TREATMENT, STORAGE OR DISPOSAL FACILITY PHONE NO. 302-678-8232	EPA I.D. NO. DE 0 0 0 0 7 9 6 3 0 0

IF THIS FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
 THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1 Hazardous Waste Solid	Poison B	UN1500				1615				X		1 DD T F 0 0 6
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION: I hereby certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above are accepted at the treatment, storage or disposal facility. The treatment, storage or disposal facility can and will accept the shipment of hazardous waste, and has agreed in writing to accept the foregoing in true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	DATE TO BE SHIPPED 9/14/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 14 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND TITLE <i>[Signature]</i>	TRAILER LICENSE PLATE NO. STATE DE 035773	DATE RECEIVED MONTH 9 DAY 14 YEAR 81

GENERATOR STATE - MAILED BY GENERATOR

AR100087

HAZARDOUS WASTE MGT. BRANCH
 BOX 1401
 VER. DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
 USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **15522**

RT A

GENERATOR NAME WCP, 544 Millsboro	GENERATOR SITE ADDRESS P.O. Box 607 Millsboro, DE 19966	GENERATOR PHONE NO. 302-934-8111	EPA I.D. NO. DE-D004395838
TRANSPORTER NO. 1 Atlantic Coast	TRANSPORTER SITE ADDRESS P.O. Box 114 Dover, DE 19901	TRANSPORTER PHONE NO. 302-678-8232	EPA I.D. NO. DE-D0000796300
TREATMENT, STORAGE OR DISPOSAL FACILITY Atlantic Coast	TREATMENT, STORAGE OR DISPOSAL FACILITY ADDRESS P.O. Box 114 Dover, DE 19901	TREATMENT, STORAGE OR DISPOSAL FACILITY PHONE NO. 302-678-8232	EPA I.D. NO. DE-D0000796300

THIS FORM IS NO. **1** OUT OF A TOTAL OF **1** THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYP.
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1 Hazardous Waste Solid	Poison B	UN1888	S			15	X			1 DD	T F O O E	
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I), IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED.

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I hereby certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James M. ...</i>	DATE TO BE SHIPPED 9/14/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 14 YEAR 1981
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OR POINT OF SHIPMENT <i>Victor D. Burns</i>	TRAILER LICENSE PLATE NO. D 778366	DATE RECEIVED MONTH 9 DAY 14 YEAR 1981

GENERATOR STATE - MAILED BY GENERATOR

ARI00088

EC,
 ID WASTE MGT. BRANCH
 BOX 1401
 DEVER, DE 19901

HAZARDOUS WASTE MANIFEST

STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **15519**

RTA

GENERATOR NAME	EPA I.D. NO.	PHONE NO.	EPA I.D. NO.
VP - E.M. Millibors SPORTER NO. 1 Atlantic Coast TRANSFORMER & ENG.	P.O. Box 607 Millibors, DE 19961	302-934-0111	DE D 0 0 4 3 9 5 0 3 0 0
	P.O. Box 114 Dever, DE 19901	302-678-8232	DE D 0 0 0 0 7 9 6 3 0 0

TREATMENT, STORAGE OR DISPOSAL FACILITY	EPA I.D. NO.	PHONE NO.	EPA I.D. NO.
Atlantic Coast	P.O. Box 114 Dever, DE 19901	302-678-8232	DE D 0 0 0 0 7 9 6 3 0 0

IF THIS FORM IS TO BE UTILIZED, ALL OTHERS ARE TO BE DISCONTINUED AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UNUMBER	FORM				UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS	SLUDGE	QUANTITY	GALLONS	CU YDS			
Hazardous Waste Solid	Poison B	UN1588	S				15	X			1 DD	T F 0 0 6
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (U.S. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION: The above described materials are properly classified, described, packaged, marked and labeled and are in proper condition for transport according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above are properly packaged, labeled, and the Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and hereby certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James E. Smith</i>	DATE TO BE SHIPPED 9/14/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 14 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND RECEIPT OF SHIPMENT <i>William Smith</i>	TRAILER LICENSE PLATE NO. STATE MD DE	DATE RECEIVED MONTH 9 DAY 14 YEAR 81

GENERATOR STATE - MAILED BY GENERATOR

ART00089

REC 11
 HAZARDOUS WASTE MGT. BRANCH
 BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
 USING A BALL POINT PEN.

RTA

DOCUMENT NO. DE-A-

15518

GENERATOR NAME MCP FM- Millsboro	SITE ADDRESS P.O. Box 607 Millsboro, DE 19966	PHONE NO. 302-934-8111	EPA I.D. NO. DE-D-0-4-3-9-5-8-3-8
TRANSPORTER NO. 1 Atlantic Coast	P.O. Box 114 Dover, DE 19901	302-678-8232	DE-D-0-0-0-7-9-6-3-0-0
TREATMENT STORAGE OR DISPOSAL FACILITY Atlantic Coast	P.O. Box 114 Dover, DE 19901	302-678-8232	DE-D-0-0-0-7-9-6-3-0-0

IF SEVERAL CONTAINER MANIFEST FORMS ARE TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. 1 OUT OF A TOTAL OF 1 THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS		SILUDGE	GALLONS	CU YDS			
1 Hazardous Waste Solid	Poison B	UN1588	S			15			X		1 DD	T F 0 0 1
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION II (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transportation carrier. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James L. Miller</i>	TITLE OWNER	DATE TO BE SHIPPED 9/14/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 14 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>R. J. Rabinowitz</i>	TRAILER LICENSE PLATE NO. DE C35773	DATE RECEIVED MONTH 9 DAY 14 YEAR 81	

GENERATOR STATE - MAILED BY GENERATOR

AR10090

HAZARDOUS WASTE MGT. BRANCH
 P.O. BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A-15521

PART A

GENERATOR NAME E.M. Millsboro Atlantic Coast TRANSPORTATION, INC.	GENERATOR SITE ADDRESS P.O. Box 607 Millsboro, DE 19966 P.O. Box 114 Dover, DE 19901	GENERATOR PHONE NO. 302-934-8111 302-678-8232	EPA I.D. NO. DE-D-04305-8398 DE-D-000796300
TREATMENT, STORAGE OR DISPOSAL FACILITY NAME Atlantic Coast	TREATMENT, STORAGE OR DISPOSAL FACILITY ADDRESS P.O. Box 114 Dover, DE 19901	TREATMENT, STORAGE OR DISPOSAL FACILITY PHONE NO. 302-678-8232	EPA I.D. NO. DE-D-000796300

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS			
1 Hazardous Waste Solid	Poison B	UN1680	S				15	X			1	DD	T F 0 0 6
2													
3													
4													

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	DATE TO BE SHIPPED 9/15/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 15 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. 01E 690109	DATE RECEIVED MONTH 9 DAY 15 YEAR 81

GENERATOR STATE - MAILED BY GENERATOR

AR100091

REC
 HAZARDOUS WASTE MGT. BRANCH
 BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
 USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **15517**

RT A

NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
GENERATOR NCR E&M Millsboro (TRANSPORTER NO.) Atlantic Coast E&M Containers (Inc)	P.O. Box 607 Millsboro, DE 19966 P.O. Box 114 Dover, DE 19901	302-934-8111 302-678-8232	DE 00439583 DE 0000796300

TREATMENT, STORAGE OR DISPOSAL FACILITY
 Atlantic Coast
 Dover, DE 19901
 302-678-8232
 DE 0000796300

IF THIS IS THE ONLY MANIFEST FORM TO BE UTILIZED, CHECK THE FOLLOWING AS APPROPRIATE.
 THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS			
HAZARDOUS WASTE SOLID	Poison D	UN1588	S				15	X			1 DD	T F O O	

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I. e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and I will permit to do so only if I am certain that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	DATE TO BE SHIPPED 9/15/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 15
TRANSPORTER NO. SIGNATURE AND IDENTIFICATION <i>[Signature]</i>	TRAILER LICENSE PLATE NO. DE 253073	DATE RECEIVED MONTH 9 DAY 15

GENERATOR STATE - MAILED BY GENERATOR

AR10092

LID WASTE MGT. BRANCH
 BOX 1401
 DORCHESTER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A-15516

RTA

GENERATOR NAME Atlantic Coast	SITE ADDRESS P.O. Box 607 Hillsboro, DE 19966	PHONE NO. 302-934-8111	EPA I.D. NO. DE D 0 4 3 9 5 8 3 8 8
TRANSPORTER NAME Atlantic Coast	SITE ADDRESS P.O. Box 114 Dover, DE 19901	PHONE NO. 302-678-8232	EPA I.D. NO. DE D 0 0 0 7 9 6 3 0 0
TREATMENT, STORAGE OR DISPOSAL FACILITY Atlantic Coast	SITE ADDRESS P.O. Box 114 Dover, DE 19901	PHONE NO. 302-678-8232	EPA I.D. NO. DE D 0 0 0 7 9 6 3 0 0

IF DRIVER/OWNER/BA MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
 THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
				SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS			
1	Hazardous Waste Solid	Poison B	UN1588	S				15	X			1 DD	T F 0 0 6	
2														
3														
4														

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	TITLE <i>[Signature]</i>	DATE TO BE SHIPPED 9/15/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 15 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. STATE DE NUMBER 5-2881	DATE RECEIVED MONTH 9 - DAY 15 - YEAR 81	

GENERATOR STATE - MAILED BY GENERATOR

ARI00593

HAZARDOUS WASTE MGT. BRANCH
 BOX 1401
 VER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

RT A

DOCUMENT NO. DE-A-1537

GENERATOR NAME NCR Elm Millsboro Atlantic Coast	SITE ADDRESS P.O. Box 607 Millsboro, DE 19968	PHONE NO. 302-934-8111	EPA I.D. NO. D E D O 4 3 9 5 8 3
TRANSPORTER NO. 1 Atlantic Coast	P.O. Box 114 Dover, DE 19901	302-678-8232	D E D O 0 0 7 9 6 3 0
TREATMENT, STORAGE OR DISPOSAL FACILITY Atlantic Coast	P.O. Box 114 Dover, DE 19901	302-678-8232	D E D O 0 0 7 9 6 3 0

THIS FORM IS NO. 1 OUT OF A TOTAL OF 1 THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TY
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1 Hazardous Waste Solid	Poison B	UN1580	S			15	X			1 DD	T F 0 0	
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OR A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James R. ...</i>	TITLE T.E. ...	DATE TO BE SHIPPED 9/15/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 15
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>John R. ...</i>	TRAILER LICENSE PLATE NO. DE 9201031	STATE DE	DATE RECEIVED MONTH 9 DAY 15

GENERATOR STATE - MAILED BY GENERATOR

ARI00094

HAZARDOUS WASTE MGT. BRANCH
 2, BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

RT A

DOCUMENT NO. DE-A- **15529**

GENERATOR NAME 2 Elk Millsboro	SITE ADDRESS P.O. Box 607 Millsboro, DE 19966	PHONE NO. 302-334-8111	EPA I.D. NO. DE-D043958308
TRANSPORTER NAME Atlantic Coast	SITE ADDRESS P.O. Box 114 Dover, DE 19901	PHONE NO. 302-678-8232	EPA I.D. NO. DE-D00007963000
TREATMENT, STORAGE OR DISPOSAL FACILITY Atlantic Coast	SITE ADDRESS P.O. Box 114 Dover, DE 19901	PHONE NO. 302-678-8232	EPA I.D. NO. DE-D00007963000

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1 Hazardous Waste Solid	Poison B	UN1588	S			15			X	1	DD	T F 0 0 6
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	TITLE OWNER	DATE TO BE SHIPPED 9/15/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 15 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. 4D 57988	STATE DE	DATE RECEIVED MONTH 9 DAY 15 YEAR 81

GENERATOR STATE - MAILED BY GENERATOR

ART00095

HAZARDOUS WASTE MGT. BRANCH
 O. BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

ART A

DOCUMENT NO. DE-A- **15523**

GENERATOR NAME MCR FM Millsboro Atlantic Coast Environmental Inc.	SITE ADDRESS P.O. Box 607 Millsboro, DE 19966	PHONE NO. 302-934-8111	EPA I.D. NO. D.E.D.0.4.3.9.5.8.3.9
TRANSPORTER NO. 1 Atlantic Coast Environmental Inc.	P.O. Box 114 Dover, DE 19901	302-678-8232	D.E.D.0.0.0.7.9.6.3.0
TREATMENT, STORAGE OR DISPOSAL FACILITY Atlantic Coast	P.O. Box 114 Dover, DE 19901	302-678-8232	D.E.D.0.0.0.7.9.6.3.0

IF BOTH GENERATOR AND TRANSPORTER ARE MANIFEST FORMS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
 THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE T. TE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1 Hazardous Waste Solid	Poison B	UN1588	S			15	X			1	DD	T F O 6 5
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED):

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so, I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	TITLE T.E.M.	DATE TO BE SHIPPED 9/15/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 15 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OR RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. D/E 035173	DATE RECEIVED MONTH 9 DAY 15 YEAR 81	

GENERATOR STATE - MAILED BY GENERATOR

ARI00096

SH-111 (Rev. 11-85) BUREAU
P.O. BOX 1401
DOVER, DE 19901

**HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE**

DOCUMENT NO. DE-A. **15527**

GENERATOR	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
NCR FM-Millsboro Atlantic Coast TRANSPORTER INC.	P.O. Box 607 Millsboro, DE 19966 P.O. Box 114 Dover, DE 19901	302-934-8111 302-679-8232	DE-19-0-4-3-9-5-8-3-8-8 DE-19-0-0-7-9-5-3-10-0
TREATMENT, STORAGE OR DISPOSAL FACILITY	P.O. Box 114 Dover, DE 19901	302-679-8232	DE-19-0-0-7-9-5-3-10-0

THIS FORM IS NO. 1 OUT OF A TOTAL OF 1 THE FIRST MANIFEST DOCUMENT NO. IS 15527

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				CONTAINERS NO. TYPE	EPA WASTE CODE	EPA WASTE TYPE					
			SOLID	LIQUID	GAZ	SLUDGE								
Hazardous Waste Solid	Poison B	UN1508	S				15	1	DD	T	P	O	U	6

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE	TITLE	DATE TO BE SHIPPED	EXPECTED ARRIVAL DATE
<i>[Signature]</i>	Director	9/15/81	9/15/81
TRANSPORTER NO. SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT	TITLE	DATE RECEIVED	STATE
<i>[Signature]</i>	Director	9/15/81	DE

GENERATOR STATE - MAILED BY GENERATOR

USE BY THIS PERSON ONLY - YEAR AT THIS PERFORMANCE

TO BE FILLED OUT BY GENERATOR

1 BY

ART 100000

HAZARDOUS WASTE MGT. BRANCH
 BOX 1401
 DEVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
 USING A BALL POINT PEN.

RT A

DOCUMENT NO. DE-A- **15525**

NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
GENERATOR EAM-Millsboro	P.O. Box 607 Millsboro, DE 19966	302-934-8111	D E D 0 4 3 9 6 2 3 8 2
TRANSPORTER NO. 1 Atlantic Coast	P.O. Box 114 Dover, DE 19901	302-678-8232	D E D 0 0 0 7 0 6 3 0 0
TREATMENT STORAGE OR DISPOSAL FACILITY Atlantic Coast	P.O. Box 114 Dover, DE 19901	302-678-8232	D E D 0 0 0 0 7 0 6 3 0 0

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1 Hazardous Waste Solid	Poison B	UN1500	S			15	X			1 DD	T F 0 0 0	
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	TITLE FACILITY	DATE TO BE SHIPPED 9/11/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 16 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. DE 35173	DATE RECEIVED MONTH 9 DAY 16 YEAR 81	

GENERATOR STATE - MAILED BY GENERATOR

ART 10055

DELT
 HAZARDOUS WASTE MGT. BRANCH
 BOX 1401
 DEVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
 USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **15524**

RT A

GENERATOR NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
NCD - P.O. Box 607 Millsboro, DE 19966 Atlantic Coast Environmental, Inc. TRANSPORTER NO. 1	P.O. Box 607 Millsboro, DE 19966	302-934-8111	D.E.D.0.0.4.3.9.5.8.3.0.0
TRANSPORTER NO. 2 (IF ANY)	P.O. Box 114 Dever, DE 19901	302-678-8232	D.E.D.0.0.0.7.9.6.3.0.0
TREATMENT, STORAGE OR DISPOSAL FACILITY	P.O. Box 114 Dever, DE 19901	302-678-8232	D.E.D.0.0.0.7.9.6.3.0.0

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TY
			SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS			
1 Hazardous Waste Solid	Poison B	UN1588	S				15	X			1 DD	T F D O	
2													
3													
4													

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James S. Miller</i>	TITLE <i>J.E. III</i>	DATE TO BE SHIPPED <i>9/17/81</i>	EXPECTED ARRIVAL DATE MONTH <i>9</i> DAY <i>17</i> YEAR <i>1981</i>
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>R. F. Williams</i>	TRAILER LICENSE PLATE NO. <i>DE 63773</i>	DATE RECEIVED MONTH <i>9</i> DAY <i>17</i> YEAR <i>1981</i>	

GENERATOR STATE - MAILED BY GENERATOR

AR100100

HAZARDOUS WASTE MGT. BRANCH
 BOX 1401
 VER. DE 19901

HAZARDOUS WASTE MANIFEST

STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A. **15380**

GENERATOR NAME EM Millsboro	SITE ADDRESS P.O. Box 607 Millsboro, DE	PHONE NO. 302-934-8111	EPA I.D. NO. D-E-D-0-0-4-3-9-5-8-3-8-0
TRANSPORTER NAME Atlantic Coast	TRANSPORTER ADDRESS P.O. Box 114 Dover, DE 19901	TRANSPORTER PHONE NO. 302-678-8232	EPA I.D. NO. D-E-D-0-0-0-7-9-6-3-0-0
TREATMENT, STORAGE OR DISPOSAL FACILITY NAME Atlantic Coast	TREATMENT, STORAGE OR DISPOSAL FACILITY ADDRESS P.O. Box 114 Dover, DE 19901	TREATMENT, STORAGE OR DISPOSAL FACILITY PHONE NO. 302-678-8232	EPA I.D. NO. D-E-D-0-0-0-7-9-6-3-0-0

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1 Hazardous Waste Solids	Poison B	UN1588	5			15	X			1 DD	T	F 0 0 6
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation, according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James A. ...</i>	TITLE TECH	DATE TO BE SHIPPED 9/15/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 17 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>...</i>	TRAILER LICENSE PLATE NO. STATE DE NUMBER 05-1173	DATE RECEIVED MONTH 9 DAY 17 YEAR 81	

GENERATOR STATE - MAILED BY GENERATOR

AR100101

HAZARDOUS WASTE MGT. BRANCH
BOX 1401
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEARLY
USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **15523**

GENERATOR NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
WCR FM Millsboro Atlantic Coast Environmental Inc	P.O. Box 607 Millsboro, DE 19966 P.O. Box 114 Dover, DE 19901	302-934-8111 302-678-8232	0-E-D-0-4-3-9-5-8-3-0 0-E-D-0-0-7-9-6-3-0-0
TREATMENT, STORAGE OR DISPOSAL FACILITY			
Atlantic Coast	P.O. Box 114 Dover, DE 19901	302-678-8232	0-E-D-0-0-7-9-6-3-0-0

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
Hazardous Waste Solid	Poison B	UN1588	S			15	X			1	DD	T F 0 0 6

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Lawrence E. ...</i>	TITLE <i>DP III</i>	DATE TO BE SHIPPED <i>9/10/81</i>	EXPECTED ARRIVAL DATE MONTH <i>9</i> DAY <i>10</i> YEAR <i>81</i>
TRANSPORTER NO. 3 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>William ...</i>	TRAILER LICENSE PLATE NO. <i>W1A</i>	DATE RECEIVED MONTH <i>9</i> DAY <i>10</i> YEAR <i>81</i>	

GENERATOR STATE - MAILED BY GENERATOR

AR100:82

HAZARDOUS WASTE MGT. BRANCH
 BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USE THIS SIDE OF THIS MANIFEST
 USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **15612**

GENERATOR NAME OR E&M-MILLSBORO	SITE ADDRESS P.O. Box 607 Millsboro, DE 19966	PHONE NO. 302-934-8111	EPA I.D. NO. DE-D-0-4-3-9-5-8-3-1
TRANSPORTER NO. 1 Atlantic Coast Environmental, Inc.	P.O. Box 114 Dover, DE 19901	302-678-8222	DE-D-0-0-0-7-9-6-3-0
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY Atlantic Coast Environmental, Inc.	P.O. Box 114 Dover, DE 19901	302-678-8222	DE-D-0-0-0-7-9-6-3-0

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. **1** OUT OF A TOTAL OF **1** THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TY
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
Hazardous Waste Solid	Poison B		S			15		X		1	DD	T F O O
2												
3												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (U.S. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so, I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James R. [Signature]</i>	TITLE DEPT	DATE TO BE SHIPPED 9/18/81	EXPECTED ARRIVAL DATE MONTH 4 DAY 18 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Thy [Signature]</i>	TRAILER LICENSE PLATE NO. DE 251241	DATE RECEIVED MONTH 9 DAY 18 YEAR 81	

GENERATOR STATE - MAILED BY GENERATOR

ART103104

NEW TITLE AND NUMBER
 BOX 1401
 VER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **15382**

ART 1

GENERATOR NAME MCR EM Millshoro	SITE ADDRESS P.O. Box 607 Millshoro, DE 19966	PHONE NO. 302-934-8111	EPA I.D. NO. DE D 0 4 3 0 5 9 3 9 2
TRANSPORTER NO. 1 Lantic Coast	P.O. Box 114 Dover, DE 19901	302-678-8232	DE 0 0 0 0 7 0 6 3 0 0
TREATMENT, STORAGE OR DISPOSAL FACILITY Atlantic Coast	P.O. Box 114 Dover, DE 19901	302-678-8232	DE 0 0 0 0 7 0 6 3 0 0

CAUTION: THESE MANIFEST FORMS TO BE UTILIZED ALL OUT THE FOLLOWING AS APPROPRIATE.
 THIS FORM IS NO. **1** OUT OF A TOTAL OF **1** THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS				CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS	TONS			
Hazardous Waste Solid	Poison B	UN1508	S				15	X				1 DD	T F 0 0 6	

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so, I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	TITLE TB III	DATE TO BE SHIPPED 9/13/81	EXPECTED ARRIVAL DATE MONTH 9 DAY 13 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. DE C35172	DATE RECEIVED MONTH 9 DAY 18 YEAR 81	

GENERATOR STATE - MAILED BY GENERATOR

AR103105

DNREC
 HAZARDOUS WASTE MGT. BRANCH
 P.O. BOX 1401
 DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USING A BALL POINT PEN.

DOCUMENT NO. DE-A-15611

PART A

NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
GENERATOR NCR E&M-MILLSBORO	P.O. BOX 607 Millsboro, DE 19966	302- 934-8111	D.E.D.0.4.3.9.5.8.3
TRANSPORTER NO. 1 Atlantic Coast Environmental, Inc	P.O. Box 114 Dover, DE 19901	302- 678-8232	D.E.D.0.0.0.7.9.6.3.0
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY Atlantic Coast Environmental, Inc	P.O. Box 114 Dover, DE 19901	302- 678-8232	D.E.D.0.0.0.7.9.6.3.0

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. 1 OUT OF A TOTAL OF 1 THE FIRST MANIFEST DOCUMENT NO. IS

GENERATOR	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE ID
				SOLID	LIQUID	GAS		GALLONS	CU YDS	POUNDS			
1	Hazardous Waste Solid	Poison B	UN1588	S			30 yd	X			1 DD	T F 0 0 6	
2													
3													
4													

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so, I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Thomas E. Schaffer</i>	TITLE EETT	DATE TO BE SHIPPED 9/21/81	EXPECTED ARRIVAL DATE 9/21/81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>R. F. Fleck</i>	TRAILER LICENSE PLATE NO. DE C135173	DATE RECEIVED 9/21/81	

DISPOSER STATE - MAILED BY GENERATOR

1. Copy 1 and copy 2 of this manifest remains Part A of copy 3 for

2. Retain the remaining copies of this manifest until the shipment.

3. Upon shipment to the Designated Disposal Facility, Transporter No. 2, Transporter No. 1, upon delivery of the shipment, obtains the signature and certification of the TSD representative or Transporter No. 2 and retains copy 5 of the

4. Upon shipment to the Designated Disposal Facility, Transporter No. 2 signs and certifies that he/she obtains the signature and certification of the Facility's authorized representative and retains copy 6 of the

5. If more than one transporter is to be utilized, the Generator must complete an additional manifest form(s) and reference the first manifest document number on the additional manifest form(s).

6. If more than four hazardous wastes from the same generator are to be shipped in the same shipment, additional manifests must be prepared by the generator.

7. Note the above instructions hold for Interstate and Intrastate shipments. If there are any questions or clarification regarding the instructions please contact the DNREC, Solid Waste Mgt. Branch, P.O. Box 1401, Ed. Tammall Bldg, Dover, DE 19901 or call (302) 736-4781.

AR100106

Betz • Converse • Murdoch • Inc.

APPENDIX 9
MAINTENANCE DEPARTMENT WASTE LIST

AR100107

3/8/81

Misc. Chemicals / Paints

Still to be removed
Atlantic Coastal Being Considered

Trans. Removal
a/22

QTY.

DESCRIPTION

4	1-pint cans quick dry enamel paint
1	2-gallon container stycast 3070
11 lbs.	Anti-Seize and Lubricating Compound
2	1-gallon cans (partly used) Rust Oleum paint
3	1-gallon cans Rance Rid paint
1	1-gallon can deep base enamel paint
1	1-pint Spanish Orange enamel paint
1 lb.	Clover Compound
1	pint ink remover
5 lbs.	2 glass jars - Versilak Structural Adhesive
2	cans microfinish (3½ oz. each)
2	1 lb. cans ajax
5	1 lb. cans spray paint
3	small bottles quick gel promotor
1	gallon container mold releuce for fiberglass
1	gallon container flux
1	quart air lube oil
1	quart paint thinner
1	gallon deep tint base enamel paint
1 lb.	glazing putty
1	gallon paint thinner
1	gallon hydraulic oil
4	gallons thread cleaner
1	5-gallon can acetone
1	5-gallon can heavy duty cleaner
1	5-gallon can lubriplate
64	1-gallon cans assorted paints
102	Quart cans of assorted paints
15	Pint cans of assorted paints
22	5-gallon cans paint
8	Bakes Ammonium Persulphate Powder (Approx. 3 lbs. ea.)
8	1-gallon containers flux
2	1-gallon containers of flux thinner
1	3-gallon container Sodium Hypochloride
7	1-gallon containers of Ammonium Hydroxide
5	1-gallon containers of Kodak Rapid Fixer
5	1-gallon containers of #55 Kodak Developer
5	Gallon Trichlorethlene
3	55-gallon Drums Mineral Spirits
1	55-gallon Drum Perolin Format #39X
2	Gallon P.C.B. Developing Solution
1	55-gallon Drum Perolin Format #P-193
1	55-gallon Drum Therma-Solve Concentrate
2	55-gallon Drums of Waste Oil & Water
1	55-gallon Drum of Rykon Industrial Oil #51
1	5-gallon can Epcute #145 NCR 7-23
1	55-gallon Dynasurf Floor Top Shine Cleaner
1	Gallon Parker Stripper #2872
1	Gallon Acetic Acid (Glacial 99½%)

AR100:08

<u>QTY.</u>	<u>DESCRIPTION</u>
9	5-gallon cans Marvelite Floor Paint
16	5-gallon cans Multi-Lube "A" Lubriplate #1-214
1	55-gallon Drum Waste Oil (Lagoon)
10	Gallon Stoddart Solvent
1	Gallon Can Cutter Oil
2	55-gallon Drums Oil
1	Gallon Can Solder Flux
1	20-gallon container of waste oil
	Miscellaneous Laboratory Chemicals
	Added inventory of paints and solvents at phase out of color lab
1	55-gallon drum of unidentified liquid
1	5-gallon Paint Red Spot (Polyurethane)
1	5-gallon Paint Quality Coatings
1	5-gallon Spray Fill Paint S & W
1	5-gallon Toluol
1	5-gallon Flux
1	5-gallon Reducer S & W B7AB37
1	5-gallon Cellosolve Acetate + 1 gallon
1	5-gallon Bee Thinner T390
1	5-gallon 8005 Reducer Martin Senour
65	gallons of Paint (47 quarts, 12 pints, 9½ pints, polyurethane
2	gallons Diacetone Alcohol
2	gallons Unknown solvent
1	gallon Cement Spar Thinner
1	gallon Bee Thinner T245
1	gallon White Shellac
1	gallon Red Spot Reducer SV2626
1	gallon Trail Reducer 58600
1	Box Spray-On Samples Aerosol
7	Boxes Assorted Laboratory Re-Agent Chemicals
1	Case - 6 Bottles Sulfuric Acid Re-Agent Grade
1.5	gallon Unresolve Plus Stripper Dynalog Inc.
4	Gallons De Cap Stripper
2	gallons Hydrachloric Acid
1	Gallon Sulfuric Acid
15	Gallons Waste Solvent (Paint)

AR100109

Betz • Converse • Murdoch • Inc.

APPENDIX 10

MANIFEST INFORMATION - MISCELLANEOUS WASTES

AR100110

DNREC
SOLID WASTE MGT. BRANCH
P.O. BOX 1401
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PLEASE TYPE OR PRINT CLEAR,
USING A BALL POINT PEN.

PART A

DOCUMENT NO. DE-A. **15375**

GENERATOR NAME CR-E&M Millsboro	SITE ADDRESS P.O. Box 607 Mitchell Rd Millsboro, DE 19966	PHONE NO. 302- 934-8111	EPA I.D. NO. D E D 0 4 3 9 5 8 3 8 8
TRANSPORTER NO. 1 American Recovery	P.O. Box 6553 Baltimore, MD 21219	301 388-0837	M D D 0 7 4 9 2 3 3 9 2
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY American Recovery	P.O. Box 6553 Baltimore, MD 21219	301- 388-0837	M D D 0 7 4 9 2 3 3 9 2

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. **1** OUT OF A TOTAL OF **2** THE FIRST MANIFEST DOCUMENT NO. IS **15375**

TO BE FILLED OUT BY GENERATOR

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TYPE
			SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS			
See Attached list			X				1775 G				35 Dr		

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.E. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so, I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Thomas S. O'Brien</i>	TITLE DEPT.	DATE TO BE SHIPPED 9-22-81	EXPECTED SHIPPING DATE MONTH 9 DAY 22 YEAR 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Joseph J. Weyant</i>	TRAILER LICENSE PLATE NO. MD 1A783	STATE MD	DATE RECEIVED MONTH 9 DAY 22 YEAR 81

DISPOSER STATE - MAILED BY GENERATOR

Part A of copy 1 and copy 2 to the recipient and retains Part A of copy 3 for the generator.

1. The generator carries the remaining copies of the manifest with the shipment.

2. The generator provides the manifest to the Designated Transporter No. 2, Transporter No. 2 obtains delivery of the shipment, obtains the signature and certification of the TSD Facility's authorized representative or Transporter No. 2 and retains copy 5 of the manifest.

3. The generator provides the manifest to the Designated Transporter No. 2, Transporter No. 2 signs and certifies the shipment, obtains the signature and certification of the TSD Facility's authorized representative and retains copy 6 of the manifest.

7. Each manifest form will record a maximum of two transporters. If more than two transporters are to be utilized, the Generator must complete an additional manifest form(s) and reference the first manifest document number on the additional manifest form(s).

8. If more than four hazardous wastes from the same generator are to be shipped in the same shipment, additional manifests must be prepared by the generator.

9. Note the above instructions hold for Interstate and Intrastate shipments. If there are any questions or clarification regarding the instructions please contact the DNREC, Solid Waste Mgt. Branch, P.O. Box 1401, Ed. Tamm Bldg., Dover, DE 19901 or call (302) 736-4781.

ARI00111

CHEMICAL LIST

DATE

Bulk - 55 GAL

NCR

9-22-81

DRUM #	QUANTITY	Class. SIZE	TOTAL VOLUME	CHEMICAL
			WEIGHT EPA UN/NA	
1	55 gal.	—	—	Dirty Waste Water
2	"	Comb. Liq.	— NA 1193	Waste Oil
3	"	F. Liq.	ID 001 UN 113	Waste Oil Thinner
4	"	F. Liq.	ID 001 "	Empty Waste Thin "
5	"	F. Liq.	ID 001 "	Mineral Spirits
6	"	P. Liq.	— NA 2310	Poison B liquid
7	"	P. Liq.	— "	"
8	"	P. Liq.	ID 001 UN 113	Mineral Spirits
9	"	F. Liq.	— NA 2310	Solvent Cleaner
10	"	F. Liq.	ID 001 UN 113	Mineral Spirits
11	"	F. Liq.	ID 001 "	Solvent Cleaner
12	"	F. Liq.	ID 001 "	Waste Flux
13	"	P. Liq.	— NA 2310	Empty Freon
14	"	Comb. Liq.	— NA 1193	Waste Oil
15	"	Comb. Liq.	— "	"
16	"	Comb. Liq.	— "	Waste Oil
17	"	P. Liq.	— NA 2310	Poison B liquid
18	"	P. Liq.	— "	Therma Solue
19	"	—	—	Floor Finish
20	16 gal	—	—	Grease
21-33	55 gal	F. Liq.	ID 001 UN 113	Waste Paints
34	"	Comb. Liq.	— NA 1193	Waste Oil
35	"	Comb. Liq.	— "	"
36	"	Comb. Liq.	— "	"

ARI00112

GENERATOR - Information on this section may be required by Waste Generator. See Back of Form

MANIFEST DOCUMENT NO. A 68593

EPA ID No. 04459 333 S
 Facility Name: ACC Recovery, Baltimore
 Address: 6400 Gen Rd, Baltimore, MD 11200
 Phone: 727-314-9111
 Date: 09 21 81
 EPA ID No: 400074223332
 Certification Number: 91A0535
 EPA ID No: 400074223332
 Name: ACC Recovery, Baltimore, MD

Department of Waste...
 Cleaning Waste...
 Hazardous Waste...
 Other...
 100% ...
 50% ...
 25% ...
 Other ...

HAZARDOUS WASTE CLASS	UNIDENTIFIED	IDENTIFIED	CONTAINER	DATE	QTY	WT	VOL	UNIT
TOTAL								

I, the undersigned, certify that the above named materials are properly classified, described and packaged in accordance with the applicable regulations of the Department of Transportation and the EPA and the Office of Environmental Programs.

Signature of Generator's Representative: [Signature] Date: 09 21 81
 Signature of Transporter: [Signature] Date: 09 21 81
 Signature of Facility: [Signature] Date: 09 21 81

HAULER - Information on this Section to be completed by Waste Hauler. See Instructions on Back of Form. NO A 68593
 Hauler Name: American Recovery
 EPA ID No: 400074223332
 Certification Number: 91A0535
 Date Material Delivered to Facility: 09 21 81
 Facility Name & State (Destination): ACC Recovery, Baltimore, MD
 Generator EPA ID No: 400074223332
 Date Material Accepted by Hauler: 09 21 81

HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR SUPPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF STATE AND FEDERAL LAWS AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Facility Name: ACC Recovery, Baltimore, MD
 Facility EPA ID No: A 68593
 Disposal/Treatment/Storage:

PART B GENERATOR - MAILED BY TSD FACILITY
 TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT
 TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT

TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED TO FACILITY
TRANSPORTER NO. 2 SIGNATURE AND CERTIFICATION OF DELIVERY AND NON-TAMPERING WITH SHIPMENT	DATE DELIVERED TO FACILITY
THE AT-RENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR ANY DISPOSITION OF REJECTED MATERIALS.	

DATE RECEIVED BY FACILITY: 09 21 81
 RECEIVED BY FACILITY: [Signature]
 TITLE: [Title]
 DATE RECEIVED BY FACILITY: 09 21 81
 DOCUMENT NO. DE A-15377

ARI0013

SOLID WASTE MGT. BRANCH
P.O. BOX 1401
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

USE THIS SIDE FIRST AND
USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **1537**

PART A

NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
GENERATOR NCR-E&M Millsboro	P.O. Box 607 Mitchell Rd. Millsboro, DE 19966	302 934-8111	DE D 0 4 3 9 5 8 3 8
TRANSPORTER NO. 1 American Recovery	P.O. Box 6553 Baltimore, MD 21219	302 388-0837	MD D 0 7 4 9 2 3 3 9
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY American Recovery	P.O. Box 6553 Baltimore, MD 21219	301 388-0837	MD D 0 7 4 9 2 3 3 9

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.
THIS FORM IS NO. **2** OUT OF A TOTAL OF **2** THE FIRST MANIFEST DOCUMENT NO. IS **15375**

TO BE FILLED OUT BY GENERATOR

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM				QUANTITY	UNITS				CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE TY
			SOLID	LIQUID	GAS	SLUDGE		GALLONS	CU YDS	POUNDS	TONS			
See Attached List			X				660X					17 DR		

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.E. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James Chaffer</i>	TITLE <i>DETR</i>	DATE TO BE SHIPPED 9-22-81	EXPECTED ARRIVAL DATE MONTH 9 DAY 27 YE 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Joseph J. Weyand</i>	TRAILER LICENSE PLATE NO. STATE MD 478358	DATE RECEIVED MONTH 9 DAY 22 YE 81	

DISPOSER STATE - MAILED BY GENERATOR

Part A of copy 1 and copy 2 to the generator and retains Part A of copy 3 for

No. 1 carries the remaining copies of along with the shipment.

Copy of the shipment to the Designated Transporter No. 2, Transporter No. 2 certifies delivery of the shipment, obtains signature and certification of the TSD Facility's authorized representative or Transporter No. 2 attaches and retains copy 5 of the

Copy of the shipment to the Designated Transporter No. 2 signs and certifies the shipment, obtains the signature and of the TSD Facility's authorized representative and retains copy 6 of the

8. If more than four hazardous wastes from the same generator are to shipped in the same shipment, additional manifests must be prepared by the generator.
9. Note the above instructions hold for Interstate and Intrastate shipments. If there are any questions or clarification regarding the instructions please contact the DNREC, Solid Waste Mgt. Branch, P.O. Box 1401, Ed. Tatnall Bldg., Dover, DE 19901 or call (302) 736-4781.

AR100114

CHEMICAL LIST

DATE

Lab Pack - 55 gal.

NCR

9-22-81

<u>DRUM #</u>	<u>QUANTITY</u>	<u>Class.</u> SIZE	<u>TOTAL VOLUME</u>		<u>CHEMICAL</u>
			<u>WEIGHT</u> EPA	<u>UN/NA</u> UNITS	
1	24 x 1 gal cans 24 x 1 gal cans	F. Liq.	ID001	un/NA	Paints
2	24 x 1 gal cans	F. Liq.	ID001		Paints
3	24 x 1 gal cans	F. Liq.	ID001		Paints
4	24 gals.	F. Liq.	ID001		Paints
5	24 x 1 gal cans	F. Liq.	ID001		Paints
6	24 x 1 gal cans	F. Liq.	ID001		Paints
7	24 x 1 gal cans	F. Liq.	ID001		Paints
8	9 x 1 gal. cans } 40 x 1 qt. cans }	F. Liq.	ID001		Paints
9	8 x 1 gal. cans } 42 x 1 qt. cans }	F. Liq.	ID001		Paints
10	8 x 1 gal } 36 x 1 qt. } 6 x 1 pt }	F. Liq.	ID001		Paints
11	8 x 1 gal } 30 x 1 qt. } 17 x 1 pt }	F. Liq.	ID001		Paints
12	16 x 1 gal cans } 31 Aerosol cans }	F. Liq.	ID001		Paints

GENERATOR Information in this form section to be completed by Waste Generator See Back of Form

MANIFEST DOCUMENT NO. A 68594

EPA ID No. DE004428389
Gen Name: MCP ECH Hillboro
Site: P.O. Box 607
Hillboro, DC 27906
No. 302-234-3111

Description of Waste: Solvents, Organic
Hazardous Waste Codes: U001, U002, U003, U004, U005, U006, U007, U008, U009, U010, U011, U012, U013, U014, U015, U016, U017, U018, U019, U020, U021, U022, U023, U024, U025, U026, U027, U028, U029, U030, U031, U032, U033, U034, U035, U036, U037, U038, U039, U040, U041, U042, U043, U044, U045, U046, U047, U048, U049, U050, U051, U052, U053, U054, U055, U056, U057, U058, U059, U060, U061, U062, U063, U064, U065, U066, U067, U068, U069, U070, U071, U072, U073, U074, U075, U076, U077, U078, U079, U080, U081, U082, U083, U084, U085, U086, U087, U088, U089, U090, U091, U092, U093, U094, U095, U096, U097, U098, U099, U100

Date: 09/22/81
EPA ID No: DE004428389
Certification Number: 81A0535
Name: American Recovery, Balto. MD

TYPE CODES: U001, U002, U003, U004, U005, U006, U007, U008, U009, U010, U011, U012, U013, U014, U015, U016, U017, U018, U019, U020, U021, U022, U023, U024, U025, U026, U027, U028, U029, U030, U031, U032, U033, U034, U035, U036, U037, U038, U039, U040, U041, U042, U043, U044, U045, U046, U047, U048, U049, U050, U051, U052, U053, U054, U055, U056, U057, U058, U059, U060, U061, U062, U063, U064, U065, U066, U067, U068, U069, U070, U071, U072, U073, U074, U075, U076, U077, U078, U079, U080, U081, U082, U083, U084, U085, U086, U087, U088, U089, U090, U091, U092, U093, U094, U095, U096, U097, U098, U099, U100

Table with columns: SHIPPING NAME, DOT HAZARD CLASS, UN OR NA NUMBER FROM, QUANTITY, UNITS, CONTAINER TYPE, EPA ID NO., HAZARD CODE, LABEL NO. Includes a TOTAL row at the bottom.

Signature: [Signature] Date: [Date]
IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED DESCRIBED, PACKAGED/MANIPULATED/STAGED ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA AND THE OFFICE OF ENVIRONMENTAL PROGRAMS

Authorized Agent (Print or Type): [Name] Signature of Agent: [Signature] Telephone Number: [Number]
HAULER Information in this Part Section to be completed by Waste Hauler See Instructions on Back of Form NO. A 68594

Company Name: American Recovery
EPA ID No: DE004428389
Certification Number: 81A0535
Date Material Accepted by Hauler: [Date]

Date Material Delivered to Facility: 09/22/81
Facility EPA ID No: DE004428389
Facility Name & State (Destination): American Recovery, Balto. MD
Generator EPA ID No: DE004428389

IS TO CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR SHIPMENT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES

Vehicle Driver (Print): [Name] Driver Signature: [Signature]
ACILITY Information in this Part Section to be completed by Facility NO. A 68594

Disposal Treatment Storage: American Recovery, Balto. MD

PART B GENERATOR - MAILED BY TSD FACILITY
This section contains a table for tracking deliveries and receipts, including columns for date delivered, date received, quantity, and weight. It also includes a section for listing reasons for any discrepancies and a signature section for the generator and facility.

IN CASE OF AN EMERGENCY OR SPILL, CONTACT THE FOLLOWING:
National Center (800) EPA 805 and the State (302) 934-6533
DOCUMENT NO. DE A 15375

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

DOCUMENT NO. DE-A- **156**

PART A

NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
GENERATOR NCR E&M-Millsboro	P.O. Box 607 Mitchell RD Millsboro, DE 19966	302- 934-8111	DE D O 4 3 9 5 8 3
TRANSPORTER NO. 1 American Recovery	P.O. Box 6553 Baltimore, MD 21219	301- 388-0837	MD D O 7 4 9 2 3 3
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY American Recovery	P.O. Box 6553 Baltimore, MD 21219	301 388-0837	MD D O 7 4 9 2 3 3

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EPA WASTE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1 See Attached List				✓		275	✓			05 DR		
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>[Signature]</i>	TITLE FE III	DATE TO BE SHIPPED 9-23-81	EXPECTED ARRIVAL DATE / MONTH / DAY 9 / 23 / 81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>[Signature]</i>	TRAILER LICENSE PLATE NO. MD H78358	STATE MD	DATE RECEIVED MONTH / DAY / YEAR 9 / 23 / 81

DISPOSER STATE - MAILED BY GENERATOR

1 of copy 1 and copy 2 to the generator and retains Part A of copy 3 for

carries the remaining copies of with the shipment.

the shipment to the Designated Transporter No. 2, Transporter No. 1 delivery of the shipment, obtain certification of the TSD Facility representative or Transporter No. 2 and retains copy 5 of the

shipment to the Designated Transporter No. 2 signs and certifies the shipment, obtains the signature and certification of the TSD Facility's authorized representative and retains copy 6 of the

transporters. If more than two transporters are to be utilized, the Generator must complete an additional manifest form(s) and reference the first manifest document number on the additional manifest form(s).

8. If more than four hazardous wastes from the same generator are to be shipped in the same shipment, additional manifests must be prepared by the generator.

9. Note the above instructions hold for Interstate and Intrastate shipments. If there are any questions or clarification regarding the instructions please contact the DNREC, Solid Waste Mgt. Branch, P.O. Box 1401, Ed. Tamm Bldg., Dover, DE 19901 or call (302) 736-4781.

AR100117

TO BE FILLED OUT BY GENERATOR

GENERATOR - Information in this section is to be completed by Waste Generator. See Back of Form.

MANIFEST DOCUMENT NO. **A 68591**

Generator EPA I.D. No. **0 E D 0 4 3 9 5 8 3 8 8**

City Name **MD - Box 607**

City **Middleboro, DE**

State **DE**

Zip **19966**

No. **302-934-8111**

Date **0 9 2 3 8 1**

EPA I.D. No. **0 0 0 7 4 9 2 3 3 9 2**

Certification Number **0 1 A 0 5 3 5**

City Name **MD - Box 607**

City **Middleboro, DE**

State **DE**

Zip **19966**

Description of Waste **Acid**

Waste Description Codes:

<input checked="" type="checkbox"/> Solvents	<input checked="" type="checkbox"/> Corrosive	<input checked="" type="checkbox"/> Toxic
<input checked="" type="checkbox"/> Cleaning Waste Oils	<input checked="" type="checkbox"/> Oxid.	<input checked="" type="checkbox"/> Inorganic Contain.
<input checked="" type="checkbox"/> Organic Contain.	<input checked="" type="checkbox"/> Mixed Chemical Solids	<input checked="" type="checkbox"/> Inorganic Sludge
<input checked="" type="checkbox"/> Organic Sludge	<input checked="" type="checkbox"/> Mixed Chemical Sludge	<input checked="" type="checkbox"/> Organic Solids
<input checked="" type="checkbox"/> Inorganic Solids	<input checked="" type="checkbox"/> Mixed Chemical Solids	

SHIPMENT NAME PROPER US DOT	US DOT HAZARD CLASS	HAZARD NUMBER	QTY	CONTAINERS	NET WT	GROSS WT	HAZARD
<i>Attached Lists</i>			4	225 G	95 LB		

Joseph J. Woyack 9-23-81 TOTAL **4 225 G 95 LB** A 68591

I hereby certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA and the Office of Environmental Programs.

Signature **Joseph J. Woyack** Date **9-23-81**

HAULER - Information in this Part Section to be completed by Waste Hauler. See Instructions on Back of Form.

City Name **American-Recovery**

City **Middleboro, DE**

State **DE**

Zip **19966**

No. **302-934-8111**

Date Material Delivered to Facility **0 9 2 3 8 1**

Facility EPA I.D. No. **0 0 0 7 4 9 2 3 3 9 2**

Facility Name & State **American-Recovery, Delto. MD**

Generator EPA I.D. No. **0 E D 0 4 3 9 5 8 3 8 8**

I hereby certify that the hazardous waste(s) described in this manifest have been accepted in proper condition for transport to the facility indicated and I understand that I am personally responsible for complying with all the requirements of Maryland law and regulations pertaining to designated hazardous substances.

Joseph J. Woyack (Name of Driver) **Joseph J. Woyack** (Signature)

FACILITY - Information in this Section to be completed by the Facility.

City Name **American-Recovery**

City **Middleboro, DE**

State **DE**

Zip **19966**

No. **302-934-8111**

Date Material Accepted by Hauler **0 9 2 3 8 1**

Generator EPA I.D. No. **0 E D 0 4 3 9 5 8 3 8 8**

Facility EPA I.D. No. **0 0 0 7 4 9 2 3 3 9 2**

Facility Name & State **American-Recovery, Delto. MD**

I hereby certify that the hazardous waste(s) described in this manifest have been accepted and that the same going (to) and coming (from) the facility.

Name of Authorized Agent (Print of Type) _____ Signature _____

HAZARDOUS WASTE MANIFEST

DEPARTMENT OF HEALTH AND MENTAL HYGIENE • OFFICE OF ENVIRONMENTAL PROGRAMS
STATE OF MARYLAND • BALTIMORE, MARYLAND 21201

GENERATOR - Detach and retain this copy for your records. HAULER - Return this copy for your records.

CHEMICAL LIST

DATE

Lub Pucks - 55 gal

NC 12

9-22-81

<u>DRUM #</u>	<u>QUANTITY</u>	<u>Class.</u> <u>SIZE</u>	<u>TOTAL VOLUME</u> <u>WEIGHT</u> <u>LOT UN/WT</u>	<u>CHEMICAL</u>
1	5 gal. ammonia (base)	C.	C 1002/UM1700	Ammonia Liquids ACS.
	1 gal. lotion			
	1 qt. pH = 7.00			
	1 qt. NaOH sol'n.			
	2 pt. pH = 10.			
	2 s. (R-3)			
	2 l. R-4P			
	1 qt. NaOH			
1 2	3 gal. Poison "B" Lig. ⁴⁷⁹	C.	R 1003/UM1479 NA 2810	Poison "B" Lig. + Oxidizers.
	1 gal. Silver Nitrate			
	3 gal. DEORIP			
	1 qt. Nessler Reagent			
	1 lb. Acacia			
	1 qt. Na Sil 11.5.14 1/2			
	2 pt. Bromophenol Blue Sol'n.			
	1 pt. Murexide Indicator			
	1 lb. Sulfide Indicator			
	2 Detergent Test Paper			
	2 lbs Silver Nitrate			
	1 lb. Oxidizers			
	1 lb. of waste Po. "B" and			

AR100119

cont

CHEMICAL LIST

DATE

Lab Packs - 55 gal NCK

9/23/81

<u>DRUM #</u>	<u>QUANTITY</u>	<u>SIZE</u>	<u>TOTAL VOLUME</u> <u>WEIGHT</u>	<u>CHEMICAL</u>
3	5 lb			Permanganate
	5 lb	(Na ₂ CO ₃)		Sodium Carbonate
	5 lb	(CaCl ₂)		Calcium Chloride
	5 lb			Zinc Sulfate
	5 lb			Sodium Pyrophosphate
	5 lb			Sodium Carbonate
	1 lb			Alumina
	1 lb			Malic Acid
	1 lb	(MgCl ₂)		Magnesium Chloride
	1 lb			Cupric Sulfate
	1 lb			Ammonium Nitrate
	1 lb			Potassium Bisulfate
	1 lb			Ferrous Sulfate
	2 x 1 lb			Oxalic Acid
	3 x 1 pt.			Potassium Chloride Sulfate
	1 lb			Ethylmagnesium Chloride
	2 lb			Citric Acid
	3 x 1/2 lb			Zinc Oxide
	1/4 lb.			Uranium
	1/4 lb.			Strontium Sulfate
	1/4 lb			Picric Acid
	1/4 lb			Barium Carbonate
	1 lb			Calcium Ammonium Sulfate
	1 1/2 lb			Ammonium Cyanide
	1 lb			Ammonium Sulfate
	25 g			Dioxane

Class.

P. solid

UN/NIT.

NA 2511

Permanganate

Solids

ARI00120

CHEMICAL LIST

DATE

9/23/51

cont

Lab Packs. - 55 gal

NCIC

<u>DRUM #</u>	<u>QUANTITY</u>	<u>SIZE</u>	<u>TOTAL VOLUME</u>	<u>WEIGHT</u>	<u>CHEMICAL</u>
4	6 x 1 gal.	Waste DECAH	}	}	F. IDW-1/UN193 Flammable Liquids
	4 x 1 gal.	Waste Thinner			
	3 x 1 gal.	Waste Oil.			
5	5 gal.	Waste Resin	}	}	F. IDW-1/UN193 Flammable Poison
	1 gal.	Thinner			
	1/2 gal.	Waste Fixer			
	2 gal.	Waste Oil.			
	2 qt.	Methanol			
	1 qt.	Formaldehyde Sol'n			
	1 qt.	2-Propanol.			
	1 Aerosol	Pett Dressing			
	2 qt.	Methyl Orange Dye.			
	1 pt.	Waste Indicator			
	2 pts.	Waste Formaldehyde			
	1 qt.	Waste Paint			
	2 lb.	Potassium Iodide			
	1 lb.	Aluminum Sulfate			
1 lb.	Cupric Sulfate				
6	10 gal.	Fixer	}	}	
	2 gal.	Waste Resin			
	1 qt.	" "			
	1 qt.	Waste Oil.			
	1 qt.	Paint Thinner			
5 lb.	Aluminum Sulfate				

AR100121

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PART A

DOCUMENT NO. DE-A- 156

NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
GENERATOR NCR E&M-Millsboro	P.O. Box 607 Mitchell Rd. Millsboro, DE	302 934-8111	D E D 0 4 3 9 5 8 3
TRANSPORTER NO. 1 American Recovery	P.O. Box 6553 Baltimore, MD 21219	301- 388-0837	M D D 0 7 4 9 2 3 3
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY American Recovery	P.O. Box 6553 Baltimore, MD 21219	301- 388-0837	M D D 0 7 4 9 2 3 3

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EP WASTE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
See Attached List			S			1100 G				20 DR.		
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (I.E., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>James S. Hoffman</i>	TITLE PEM	DATE TO BE SHIPPED 9-23-81	EXPECTED ARRIVAL DATE 11/2/81
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Joseph J. Wenzel</i>	TRAILER LICENSE PLATE NO. AD H 783570	DATE RECEIVED 9-23-81	

DISPOSER STATE - MAILED BY GENERATOR

copy 2 to the
 Part A of copy 3 for

the remaining copies of
 shipment.

ent to the Designated
 No. 2, Transporter No.
 of the shipment, obli-
 gation of the TSD
 nstative or Transporter
 ins copy 5 of the

to the Designated
 2 signs and certifies
 gains the signature and
 ility's authorized p-
 retains copy 6 of the

transporters. If more than two transporters are to be utilized, the Generator must complete an additional manifest form(s) and reference the first manifest document number on the additional manifest form(s).

B. If more than four hazardous wastes from the same generator are to be shipped in the same shipment, additional manifests must be prepared by the generator.

9. Note the above instructions hold for Interstate and Intrastate shipments. If there are any questions or clarification regarding the instructions please contact the DNREC, Solid Waste Mgt. Branch, P.O. Box 1401, Ed. Tatnall Bldg., Dover, DE 19901 or call (302) 736-4781.

AR100123

GENERATOR Information in this Section is to be completed by the Generator

MANIFEST DOCUMENT NO. **A 73503**

EPA ID No. **DE D 04395 9388**

Development of this Manifest Form from Description of Waste **MCS**

Name **NCR East Millboro**
Address **P.O. Box 607**

Waste Description
 Solvents
 Cleaning Agents
 Chlorinated Solvents
 Organic Liquids
 Inorganic Liquids
 Acids
 Alkalis
 Organic Solids
 Inorganic Solids
 Mixed Chemicals

City **Millboro, DE 19966**

No. **302-931-8111**

Date **09 23 81**

EPA ID No. **MD D 074923392**

Waste Description
 Solvents
 Cleaning Agents
 Chlorinated Solvents
 Organic Liquids
 Inorganic Liquids
 Acids
 Alkalis
 Organic Solids
 Inorganic Solids
 Mixed Chemicals

Certification Number **81A0535**

EPA ID No. **MD D 074923392**

Name **American Recovery, Balto, MD**

City **Baltimore, MD**

State **MD**

Shipping Name **Waste**

HAZARDOUS CLASS **9-23-81**

Quantity **1100**

Weight **2800**

Volume **2800**

Manifest Number **A 73503**

Signature of Agent **Joseph J. Wyszock**

Signature of Agent **Lawrence E. Shaffer**

Signature of Agent **Lawrence E. Shaffer**

Signature of Agent **Lawrence E. Shaffer**

Signature of Agent **Lawrence E. Shaffer**

Signature of Agent **Lawrence E. Shaffer**

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Signature of Agent **Lawrence E. Shaffer**

Signature of Agent **Lawrence E. Shaffer**

Signature of Agent **Lawrence E. Shaffer**

Signature of Agent **Lawrence E. Shaffer**

HAULER Information in this Section to be completed by Waste Hauler

Name **American Recovery**

EPA ID No. **MD D 074923392**

Certification Number **81A0535**

Name **American Recovery, Balto, MD**

City **Baltimore, MD**

State **MD**

Date Material Accepted by Hauler **09 23 81**

Signature of Agent **Joseph J. Wyszock**

Signature of Agent **Joseph J. Wyszock**

Signature of Agent **Joseph J. Wyszock**

Signature of Agent **Joseph J. Wyszock**

Signature of Agent **Joseph J. Wyszock**

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Signature of Agent **Joseph J. Wyszock**

Signature of Agent **Joseph J. Wyszock**

Signature of Agent **Joseph J. Wyszock**

Signature of Agent **Joseph J. Wyszock**

Signature of Agent **Joseph J. Wyszock**

RECEIVED BY THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

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HAZARDOUS WASTE MANIFEST

DEPARTMENT OF HEALTH AND MENTAL HYGIENE • OFFICE OF ENVIRONMENTAL PROGRAMS
STATE OF MARYLAND • BALTIMORE, MARYLAND 21201

AR 100124

GENERATOR: Check and retain this copy for your records. HAULER: Check and retain this copy for your records.

CHEMICAL LIST

DATE

Lab Packs - 55 gal

NC 12

9-22-51

<u>DRUM #</u>	<u>QUANTITY</u>	<u>Class.</u> <u>SIZE</u>	<u>TOTAL VOLUME</u> <u>WEIGHT</u> <small>CGT UN/WT</small>	<u>CHEMICAL</u>
1	5 gal. ammonia (base)	C.	C 0002/JUN/760	Perman Liquids N.C.S.
	1 gal. lotion			
	1 qt. pH = 7.00			
	1 qt. NaOH soln.			
	2 pt. pH = 10.			
	2 1/2 L R-31			
	2 L R-4P			
	1 qt. NaOH			
2	3 gal. Persu B ¹ Liq.	P. Lf. Ox. R 0003/UM/479 NR 2810	Persu B ¹ ↓ Oxidize	
	1 gal Silver Nitrate			
	3 gal. DECAT			
	1 qt. Nessler Reagent			
	1 lb. Acacia			
	1 qt. Na Sily 11 S.H ₂			
	2 qt. Bromoplural Blue Soln.			
	1 pt. Murexide Indicator			
	1 lb. Sulfide Indicator			
	2 Detergents Test. Kit			
	2 lbs Silver Nitrate			
	1 lb. Oxidizers			
	1 lb. of waste P. Lf. B ¹ Lf.			

cont

CHEMICAL LIST

DATE

Les Packs - 5 gal NCK

9/23/81

<u>DRUM #</u>	<u>QUANTITY</u>	<u>SIZE</u>	<u>TOTAL VOLUME</u> <u>WEIGHT</u>	<u>CHEMICAL</u>
3	5 lb	Panicle		Class.
	5 lb	(NaCO ₃) Sodium Carbonate		P. solid
	5 lb	(CaCl ₂) Calcium Chloride		
	5 lb	Zinc Sulfate		<u>UN/NIT</u>
	5 lb	Sodium Pyrophosphate		NA 2511
	5 lb	Sodium Carbonate		
	1 lb	Alumina		
	1 lb	Malic Acid		
	1 lb	(MgCl ₂) Magnesium Chloride		Poison B"
	1 lb	Cupric Sulfate		Solids
	1 lb	Ammonium Nitrate		
	1 lb	Potassium Bisulfate		
	1 lb	Ferrous Sulfate		
	2 x 1 lb	Oxalic Acid		
	3 x 1 pt.	Potassium Chloride Salt		
	1 lb	Ethylendiamine tetraacetic acid		
	2 lb	Citric Acid		
	3 x 1/2 lb	Zinc Oxide		
	1/4 lb.	Urea		
	1/4 lb.	Strick Soluble		
	1/4 lb	Picric Acid		
	1/4 lb	Barium Carbonate		
	1 lb	Citric Ammonium Sulfate		
	1/2 lb	Cupric Sulfate		
	1 lb	Ammonium Sulfate		
	25 g	Diphenylpicrylhydrazyl		

AR100126

CHEMICAL LIST

DATE

cont
Lab Packs - 55 gal

NCIC

9/23/51

<u>DRUM #</u>	<u>QUANTITY</u>	<u>SIZE</u>	<u>TOTAL VOLUME</u>		<u>CHEMICAL</u>
			<u>WEIGHT</u>	<u>CLASS</u>	
4	6 X 1 gal.	Waste DECHEM	}	F. ID# 1/UN193	Flammable Liquids
	4 X 1 gal.	Waste Thinner			
	3 X 1 gal.	Waste Oil.			
5	5 gal.	Waste Resin	}	F. ID# 1/UN193 Pen Sol	Flammable Poison
	1 gal.	Thinner			
	1/2 gal.	Waste Fixer solution			
	2 gal.	Waste Oil.			
	2 qt.	Methanol			
	1 qt.	Formaldehyde Sol'n.			
	1 qt.	2-Propanol			
	1 Aerosol	Pett Dressing			
	2 qt.	Methyl Orange Dye.			
	1 pt.	Waste Indicator			
	2 pts.	Waste Formaldehyde			
	1 pt.	Waste Paint			
	2 lb.	Potassium Iodide			
1 lb.	Aluminum Sulfate				
1 lb.	Cupric Sulfate				
6	10 gal.	Fixer	}		
	2 gal.	Waste Resin			
	1 qt.	" "			
	1 qt.	Waste Oil.			
	1 qt.	Paint Thinner			
	5 lb.	Aluminum Sulfate			

AR100127

CHEMICAL LIST

DATE

cont

100 lbs. Packs - 55 gal

NCR

7/23/51

<u>DRUM #</u>	<u>QUANTITY</u>	<u>SIZE</u>	<u>TOTAL VOLUME</u>	<u>CHEMICAL</u>
cont #6	11b. Sodium Chromate		<u>Mass</u>	<u>1.24</u> <u>124/20</u>
	11b. Barium Chloride		F. P.S.	IX-1 UN 192
	1/4 lbs. Ammonium Fluoride			UN 211
	100 ml. Ferrous Ammonium Sulfate			
	1/4 lbs. Mercuric Sulfate			Flammable
	20 9x100 ml. Potassium Iodate.			+
	100 ml. Copper Sulfate S.H.			Corrosive.
	11b. Waste Laboratory, Utensils.			
	1 pt. Barium Chloride.			
	2 1/2 b. Waste Ajax.			
7	7 gal. Sulfuric Acid			
	3 gal. Hydrochloric Acid			C.D. 22 UN 170
	1 gal. Acetic Acid			Corrosive Liq.
	1 qt. Phosphoric Acid			
	1 qt. Hydrochloric Acid			
8	2 x 3 gal. Liquid Ammonium Chloride			C.D. 22 UN 170
	6 x 1 gal. Ammonium Hydroxide			
	1 x 1 gal. Ammonium Hydroxide S.H.			Corrosive Liq.
	2 x 5 lb. Sodium Hydroxide			
	5 lb. Citric Acid.			
9	9.5 lb. Ammonium Nitrate			RD 201 UN 147
	1 pt. Sodium Bisulfate			

AR100128

CHEMICAL LIST

DATE

cont.

Lab Packs - 55 gal

NCR

7/23/81

<u>DRUM #</u>	<u>QUANTITY</u>	<u>SIZE</u>	<u>TOTAL VOLUME</u>		<u>CHEMICAL</u>
			<u>WT</u>	<u>CLASS</u>	
10	7X 1 gal.	Ammonia			
	1 qt.	Sodium Hydroxide			
	1 qt.	Potassium Iodide sol'n.			
	1 lb.	Ammonium Chloride			
	1 lb.	Ammonium Oxalate			Corrosives
	1 lb.	Ammonium Acetate			Poison B ⁺ S ⁺
	1 lb.	Disol. Eth. Diamine Tetraacetate			
	1 pt.	pH 10. Buffer			
	1 qt.	Starch Indicator Sol'n.			
	1 lb.	Glycerine			
	100g.	Guanylate Sulfate	C.		CD02 001760
	1/4 lb.	Phenolphthalein	Vol. Sol.		NA 211
	100ml.	Glycerine			
	1 lb.	Ammonium Sulfate			
	1 lb.	Sodium Chromate			
	1 qt.	Snake Poison "B" liquid.			
	1 lb.	Barium Chloride			
	1 pt.	Ferric Sulfate Sol'n.			
	1 pt.	Ammonium Molybdate			
	2 x 100g.	Mercuric Pent. Pillars			
	1 x 100g.	Mercuric Pillars			
41	1.5 gal.	Sodium Hypochlorite			
	1 qt.	pH = 9.0 Buffer			
	2L	Sulfuric Acid			
	1 pt.	Bromine Sol'n			
	1 pt.	Nitric Acid			
	3 x 1 pt.	N-42 Sol'n			

AR100129

CHEMICAL LIST

DATE

cont

Lab Packs - 55 gal

NCR

9-23-81

<u>DRUM #</u>	<u>QUANTITY</u>	<u>SIZE</u>	<u>TOTAL VOLUME</u> <u>WEIGHT</u>	<u>CHEMICAL</u>
cont # 18	6 x 250 ml	R-21 Salts	Class <u>CPH 2NA</u>	
	1 pt. Reducing Mixture			
	1 500 ml Phosphoric Acid			C CODED UN1700 Corrosives
	1 250 ml Hydrochloric Acid			
12-15	16 x 1 gal can	3	F. Lig. 7001	Paints
18-20	12 x 1 gal	Armonia		C CODED UN1760 Corrosive

Bulk -	55 gal	NCR		9-23-81
<u>Drum #</u>	<u>Quantity</u>		<u>Class</u>	<u>UN/NA</u>
1-4	4 x 55 gal	Waste Oil	Contam. NA 1993	Combustible
Manifest # 68591	1 x 55 gal	Contaminated Soil	NA 2811	Person "B" Solg
5				

NR10019

DNREC
SOLID WASTE MGT. BRANCH
P.O. BOX 1401
DOVER, DE 19901

HAZARDOUS WASTE MANIFEST
STATE OF DELAWARE

PRINTED IN THE U.S.A.
USING A BALL POINT PEN.

DOCUMENT NO. DE-A- **153**

PART A

GENERATOR NAME	SITE ADDRESS	PHONE NO.	EPA I.D. NO.
NCR- E&M	P.O. Box 607 Millboro, De. 19966	302-234-8111	DE D 04 395
TRANSPORTER NO. 1 (IF ANY)	9407 Thornewood Drive Clean America, Inc. Baltimore, Md. 21234	301-354-0751	
TRANSPORTER NO. 2 (IF ANY)			
TREATMENT, STORAGE OR DISPOSAL FACILITY	Solly Rd. Landfill Browning Ferris Industries Baltimore, Md.	301-686-6161	MD D 000 79 73

IF MORE THAN ONE MANIFEST FORM IS TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPRIATE.

THIS FORM IS NO. OUT OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS

TO BE FILLED OUT BY GENERATOR

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM			QUANTITY	UNITS			CONTAINERS NO. TYPE	EPA HAZ CODE	EP WASTE
			SOLID	LIQUID	GAS		SLUDGE	GALLONS	CU YDS			
1 Floor Sweeps	Corrosive	JA 0795	X			100				3	36	P 0
2												
3												
4												

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e., IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED).

GENERATOR'S CERTIFICATION - This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA, and the State, the wastes described above were consigned to the Transporter named, The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so, I certify that the foregoing is true and correct to the best of my knowledge

GENERATOR'S SIGNATURE <i>James E. Shaffer</i>	TITLE <i>DEIR</i>	DATE TO BE SHIPPED 9/25/81	EXPECTED SHIPMENT DATE MONTH: 9 DAY: 25
TRANSPORTER NO. 1 SIGNATURE AND CERTIFICATION OF RECEIPT OF SHIPMENT <i>Gregory J. ...</i>	TRAILER LICENSE PLATE NO. <i>AND</i>	STATE <i>MD</i>	NUMBER <i>303</i>

DISPOSER STATE - MAILED BY GENERATOR

Part A of copy 1 and copy 2 to the transporter and retains Part A of copy 3 for its files.

No. 1 carries the remaining copies of the manifest along with the shipment.

Transporter No. 1, or Transporter No. 2, if used, certifies delivery of the shipment, obtains the signature of the generator's authorized representative or Transporter No. 1, and retains copy 5 of the manifest.

Transporter No. 1, or Transporter No. 2, if used, certifies delivery of the shipment, obtains the signature of the generator's authorized representative or Transporter No. 1, and retains copy 6 of the manifest.

transporters. If more than two transporters are to be utilized, the Generator must complete an additional manifest form(s) and reference the first manifest document number on the additional manifest form(s).

8. If more than four hazardous wastes from the same generator are to be shipped in the same shipment, additional manifests must be prepared by the generator.

9. Note the above instructions hold for Interstate and Intrastate shipments. If there are any questions or clarification regarding the instructions please contact the DNREC, Solid Waste Mgt. Branch, P.O. Box 1401, Ed. Tatnall Bldg., Dover, DE 19901 or call (302) 736-4781.

AR100132

GENERATOR (See Instructions on Back of Form)

MANIFEST DOCUMENT NO. **A 68590**

EPA Number: **P E D 0 4 3 8 3 8 3 8 3**
Site Name: **HR - DAN/Killeberg**
Address: **P.O. Box 607**
Killeberg, Delaware 19846
Phone: **301-934-8111**

State: **DE**
County: **NEW CASTLE**
City: **SMITHFIELD**
Zip: **19804**
WASTE RECEIVING PARTY

Date: **8-9-81**
EPA ID: **D 0 0 0 0 0 0 0 0 0 0**
Certification Number: **1 1 4 0 3 8 6**
Generator Name: **Browning Ferris Industries**
Address: **Baltimore, MD**

HAZARDOUS WASTE CLASSIFICATION
UNCLASIFIED
CORROSIVE
FLAMMABLE LIQUID
FLAMMABLE SOLID
OXIDIZING
TOXIC
EXTREMELY TOXIC
RADIOACTIVE
OTHER

Table with columns for EPA ID, Certification Number, Generator Name, and Hazardous Waste Class. Includes handwritten entries like 'Floor Sweepings' and 'Carcasses'.

Signature: *[Handwritten Signature]*
Date: **8/9/81**
Total: **164 P 200**
Manifest Number: **A 68590**

HAULER - Information in the Pink Section to be completed by Waste Hauler. Manifest Number: **A 68590**

Hauler Name: **Clean America, Inc.**
EPA No.: **D 0 0 0 0 0 0 0 0 0 0**
Certification Number: **1 1 4 0 3 8 6**
EPA ID: **68590**
Date Material Accepted by Hauler: **8/9/81**

Date Material Delivered to Facility: **8/9/81**
Facility EPA I.D. No.: **00 00 00 00 00 00 00 00 00 00**
Facility Name & Site (Destination): **09 2 8 1**

HEREBY CERTIFY THAT THE HAZARDOUS WASTE(S) DESCRIBED IN THIS MANIFEST HAVE BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT TO THE FACILITY INDICATED AND I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE FOR COMPLYING WITH ALL THE REQUIREMENTS OF MARYLAND LAW AND REGULATIONS PERTAINING TO DESIGNATED HAZARDOUS SUBSTANCES.

Signature of Generator: *[Handwritten Signature]*
Signature of Hauler: *[Handwritten Signature]*

Facility Name & Site (Destination): **A 68590**

Facility Name & Site (Destination): **09 2 8 1**
EPA ID: **P E D 0 4 3 8 3 8 3 8 3**

Signature of Facility: *[Handwritten Signature]*

HAZARDOUS WASTE MANIFEST
DEPARTMENT OF HEALTH AND MENTAL HYGIENE • OFFICE OF ENVIRONMENTAL PROGRAMS
STATE OF MARYLAND • BALTIMORE, MARYLAND 21201

AR100133

Betz • Converse • Murdoch • Inc.

APPENDIX 11
MONITORING WELL DATA

AR100134

GOEL ASSOCIATES, INC.

ASSOCIATED WITH EDWARD H. RICHARDSON ASSOC., INC.
 Box 1240 Dover, Delaware 19901 Tel. 302 69719591

COMM. NO. .. 6319
 RECEIVED .. 8/26/81
 SAMPLED .. 8/26/81
 SAMPLED BY .. R.R.J. of GA

N.C.R. Corporation
 P. O. Box 607
 Millsboro, DE 19966

Attn: Mr. Dick Calhoun
 Mr. Larry Shaffer

LABORATORY ANALYSIS REPORT

SAMPLE NO.

SAMPLE DESCRIPTION

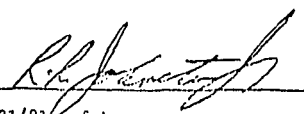
SAMPLE NO.	SAMPLE DESCRIPTION
AH850	Well #4 - Pumped at 1055 hours
AH851	Well #1 - Pumped at 1118 hours

RESULTS OF ANALYSES

RESULTS OF ANALYSES	AH850	AH851				
Total Chromium, mg/l	0.15	<0.05*				
Hexavalent Chromium, mg/l	0.13**	<0.02				

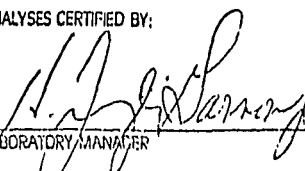
REMARKS: * This analysis was also run yielding a spike recovery of 114%.
 ** This analysis was also run yielding a spike recovery of 143%.

SUPERVISING ANALYST:



8/31/81 fyh

ANALYSES CERTIFIED BY:



 LABORATORY MANAGER

AR100135

MECHANICAL

COEL ASSOCIATES, INC.

ASSOCIATED WITH THE NATIONAL EQUIPMENT ASSOC., INC.
Box 1240 Dover, Delaware 19901 Tel. 302 69719591

FEB 01 10:36

COMM. NO. 6319
RECEIVED 2/4/81
SAMPLED 2/4/81
SAMPLED BY R.R.J./H.J.G.
of GA

NCR Corporation
Michell Road
Millsboro, DE 19966

Attn: Mr. John Miller

PO N28-938950

LABORATORY ANALYSIS REPORT

SAMPLE NO.	SAMPLE DESCRIPTION
AE819	Well #1 - Grab at 1005 hours
AE820	Well #2 - Grab at 1110 hours
AE821	Well #3 - Grab at 1051 hours
AE822	Well #4 - Grab at 1040 hours
AE823	Well #5 - Grab at 1025 hours

RESULTS OF ANALYSES

	AE819	AE820	AE821	AE822	AE823
Copper, mg/l	<0.05	<0.05	<0.05	<0.05	<0.05
Zinc, mg/l	<0.05	<0.05	<0.05	<0.05	<0.05
Nickel, mg/l	<0.05	<0.05	<0.05	<0.05	<0.05
Calcium, mg/l	<0.01	<0.01	<0.01	<0.01	<0.01
Chromium, mg/l (Total)	<0.01	<0.01	<0.01	0.21	<0.01
Silver, mg/l	<0.05	<0.05	<0.05	<0.05	<0.05
Lead, mg/l	<0.01	<0.01	<0.01	<0.01	<0.01
Iron, mg/l	0.46	0.15	0.73	0.62	0.32
Phosphates, mg/l as P	<0.03	<0.03	0.05	0.53	0.11
Phenol, mg/l	<0.005	<0.005	<0.005	<0.005	<0.005
Cyanide, mg/l	<0.01	<0.01	<0.01	<0.01	<0.01
Oil & Grease, mg/l	<1	<1	<1	<1	<1
pH, Standard Units	5.4	5.1	5.2	6.0	5.8
Depth, Top of Casing to Water Surface (Ft.)	15.9	15.4	13.6	15.9	14.2
Approximate Gallons Pumped Prior to Collection	66	30	30	36	30

REMARKS: All analysis was performed in accordance to "Methods for Chemical Analysis of Water and Wastes", EPA-600/4-79-020. All samples were preserved in the field.

SUPERVISING ANALYST:

ANALYSES CERTIFIED BY:

James R. Nelson
2/10/81 Jyh

H. J. G. Lennart
LABORATORY MANAGER
ARI00136

Betz • Converse • Murdoch • Inc.

APPENDIX 12
SOIL TEST RESULTS

AR100137

APPENDIX 12

LABORATORY TEST REPORT - SOIL TEST RESULTS

Samples No. 9191-9194
NCR Corporation
September 17, 1981

<u>Parameter</u>	<u>Background Soil (mg/l)</u>	<u>Soil Below Waste (mg/l)</u>
Total Chromium	<0.02	<0.02
Lead	0.120	0.120
Cyanide	<0.005	<0.005
Arsenic	0.003	0.001

The data shown are from the analysis of Toxic Extraction Procedure leachate from soil samples.

ARI00138