

Scan Company Number: HWCB2016890

DEQ/DWM/Hazardous Waste Section

NCD/NCR Number: AVdel USA, LLC

Full Facility Name: NCD 101 779 726

City: Stanfield

County: Stanly

Dates of File: _____

Document Type (s)

- Inspection Reports
- *Ticket NOV
- *LF & IMA NOV
- *Settlement Agreement
- *Compliance Orders
- *(In Comment Section Provide Docket Number and Date of Action)
- Correspondence/Letters
- Confidential
- Pictures, CD
- Other Information (See Comment Section)
- Box Number

Comments:

Manifests

EPA ID Number: NC D 101779726

Facility Name: AVDEL USA, LLC

Street: 614 NC HWY 200 SOUTH

City: STANFIELD ZIP: 28163 County: STANLY

Contact Name: DOUG COLLINS Phone#: 704-988-7110

EVALUATION DATA New: Change: Delete:

Date: 03/25/2010 Evaluation Type: CER

Date: / / Evaluation Type:

Inspector ID #: 046

Evaluation Comments:

SNC DETERMINATION: If this evaluation resulted in a SNC determination, fill in this block. (NOTE: SNC determinations are SNY/SNN evaluations. The SNY/SNN evaluation can also be submitted later on a separate form.)

Facility is (check one):
 a SNC (SNY evaluation) Docket # _____
or
 no longer a SNC (SNN evaluation)

YES/NO CSE ONLY

Waste Involved	Volume	Exposure Media (a, gw, sw, s)	Distance to Residences	Number of People involved	Distance to On-site wells	Distance to Off-site wells
USED OIL CONTAMINATED SOIL	165-GAL	SOIL	>1000'	100	< 100'	UNK

Date Determined: / /

Branch: 01 Person: 046

Return to Compliance: / / / /
Scheduled Actual

Regulation Description: _____

Comment: _____

Hazardous Waste Section File Room Document Transmittal Sheet

I. Identification:

Fill out form completely and accurately before sending it to File Room

Your Name	SEAN MORRIS <small>Print Your Name Above (Last, First)</small>
EPA ID #	N C D 1 0 1 7 7 9 7 2 6
Facility Name	ANDEL USA, LLC <small>Facility's Name as it appears in RCRAInfo</small>

II. Document Type:

Highlight or Circle One Document Type below

General (G) <input type="checkbox"/> Notification 8700 (8700) <input type="checkbox"/> Hazardous Waste Report (HWR) <input type="checkbox"/> Fees/Invoices (F) <input type="checkbox"/> Technical Assistance (TA) <input type="checkbox"/> Compliance Assistance Visit (CAV) <input type="checkbox"/> Correspondences to/from Facility (GC) <input type="checkbox"/> Other (GO)	Permit (P) <input type="checkbox"/> Part A Application (PA) <input type="checkbox"/> Part B Application (PB) <input type="checkbox"/> Notice of Deficiency (NOD) <input type="checkbox"/> Permitting Information (PI) <input type="checkbox"/> Alternative to Post-Closure Permit (APC) <input type="checkbox"/> Correspondences to/from Facility (CP) <input type="checkbox"/> Other (PO)	Corrective Action (A) <input type="checkbox"/> Corrective Action Information (CAI) <input type="checkbox"/> RCRA Facility Assessment (RFA) <input type="checkbox"/> Confirmatory Sampling (CS) <input type="checkbox"/> RCRA Facility Investigation (RFI) <input type="checkbox"/> Interim Measures Study/Plan/Implemented (IM) <input type="checkbox"/> Corrective Measure Plan/Design (CMP) <input type="checkbox"/> Land Use Restriction, Institutional Controls (LUR) <input type="checkbox"/> Remediation System Effective Reports (RSER) <input type="checkbox"/> Corrective Measures Study (CMS) <input type="checkbox"/> HSWA Remedy (HSWA) <input type="checkbox"/> Correspondences to/from Facility (CA) <input type="checkbox"/> Other (AO)
Closure (C) <input type="checkbox"/> Closure Information (CI) <input type="checkbox"/> Closure Plan (CP) <input type="checkbox"/> Closure Report/Certification (CR) <input type="checkbox"/> Correspondences to/from Facility (CC) <input type="checkbox"/> Other (CLO)	Groundwater (W) <input type="checkbox"/> Groundwater Monitoring Report (GMR) <input type="checkbox"/> Comprehensive Monitoring Event (CME) <input type="checkbox"/> Correspondences to/from Facility (CW) <input type="checkbox"/> Other (WO)	
Financial (F) <input type="checkbox"/> Financial Record Review (FRR) <input type="checkbox"/> Mechanisms and instruments (MI) <input type="checkbox"/> Financial statements (FS) <input type="checkbox"/> Balance sheets (BS) <input type="checkbox"/> Tax returns (TR) <input type="checkbox"/> Insurances (I) <input type="checkbox"/> Correspondences to/from Facility (FC) <input type="checkbox"/> Other (FO)	Inspection/Investigation (I) <input type="checkbox"/> Compliant Investigation (CMP) <input checked="" type="checkbox"/> Compliance Evaluation Inspection (CEI) <input type="checkbox"/> Case Development Inspections (CDI) <input type="checkbox"/> Compliance Schedule Evaluation (CSE) <input type="checkbox"/> Focused Compliance Inspection (FCI) <input type="checkbox"/> Emergency Response (EMR) <input type="checkbox"/> Correspondences to/from Facility (CI) <input type="checkbox"/> Other (IO)	Enforcement (E) <input type="checkbox"/> Ticket Notice of Violation (TNOV) <input type="checkbox"/> Notice of Violation (NOV) <input type="checkbox"/> Immediate Action Notice of Violation (IANOV) <input type="checkbox"/> Enforcement Package (EP) <input type="checkbox"/> Compliance Order (CO) <input type="checkbox"/> Administrative Order on Consent (AOC) <input type="checkbox"/> Settlement Agreement (SA) <input type="checkbox"/> Correspondences to/from Facility (EC) <input type="checkbox"/> Other (EO)
Miscellaneous (M)		

III. Description:

Use up to 256 characters to describe the document. Every word below can be used as a searchable index to locate the document

IV. Date of Document: Date when the document generated, the date typed or printed on the front page of document

Date on Document	04	12	2010
	<small>Month</small>	<small>Day</small>	<small>Year</small>

V. File Room Use Only:

Date Received			
	<small>Month</small>	<small>Day</small>	<small>Year</small>
Date Scanned			
	<small>Month</small>	<small>Day</small>	<small>Year</small>
Date Returned			
	<small>Month</small>	<small>Day</small>	<small>Year</small>
Scanners Initials			

COPY

NC DEPT OF ENVIRONMENT & NATURAL RESOURCES
DIVISION OF WASTE MANAGEMENT
HAZARDOUS WASTE SECTION

RCRA INSPECTION REPORT

1. **Facility Information:** Avdel USA, LLC
614 NC Hwy. 200 South
Stanfield, N.C. 28163
CESQG – NCD 101 779 726
2. **Facility Contact:** Doug Collins, Engineering Manager
(704) 888-7110
3. **Survey Participants:** Mr. Doug Collins
Ms. Donna Carlos, IHSB
Mr. George Adams, IHSB
Mr. Sean Morris, Environmental Senior Specialist
4. **Date of Inspection:** March 25, 2010
Date of Report: April 12, 2010
5. **Purpose of Inspection:** To determine compliance with 40 CFR 260-279
6. **Facility Description:**

On March 25, 2010 Mr. George Adams, Inactive Hazardous Sites Branch (IHSB), Ms. Donna Carlos, IHSB, and I conducted a site visit at Avdel USA, LLC located in Stanfield, NC. The facility has approximately 100 employees, operates on two shifts, and is 88,259 square feet in size. The facility is located on a 13.8 acre tract of land and the facility is connected to municipal water and sewer. The facility manufactures blind fasteners (rivets) for the automotive industry. The rivets are manufactured from wire aluminum, steel and stainless steel. The facility does not plate or coat any of the rivets.

The facility is notified as a conditionally exempt small quantity generator (CESQG) and primarily generates hazardous waste from two part washers and from waste aerosol liquids from one can puncture device. The facility also generates used oil and universal waste lamps and batteries. The facility contracts Safety-Kleen for all of the hazardous waste, used oil, and universal waste disposal. On April 9, 2010 I received copies of the last three years of hazardous and non-hazardous waste shipments from Avdel USA. The facility generates approximately 15-30 gallons of hazardous waste solvent every three months. The facility is currently operating as a CESQG.

The facility is currently under assessment by the IHSB and groundwater contamination has been confirmed. There is an air stripper with one extraction well currently in operation. There are also multiple monitoring wells onsite.

7. Area of Inspection:

Manifests:

All used oil and universal waste is collected and disposed by Safety-Kleen Systems. Manifests were available for used oil and universal waste collection.

Waste Storage Area:

Oil Room – This area is used to store used oil, universal waste and the waste aerosol liquid collection container. There were three 2,500-gallon and one 175-gallon above ground used oil tanks in the room. Each of the tanks was properly labeled at the time of the inspection. There was one hazardous waste satellite accumulation container used to collect waste aerosol liquids in the room. The container was labeled with the contents and is managed as hazardous waste. The container has not had to be disposed of in several years. There was one part washer in the room that is serviced every six months by Safety-Kleen. There were four boxes of universal waste lamps and three 5-gallon containers of universal waste batteries in storage. All the containers were being properly managed. The second part washer is located just outside of the Oil Room.

Area of Concern:

The facility is equipped with a dust collection unit. The unit filters air in the production area using filters. Mr. Collins explained that the dust and oil mist that passes through the filters is vented to the roof and rain water mixes with the dust and is discharged through one of the facility's roof gutters. The area of ground under the roof gutter had a small amount of gravel that appeared to be contaminated with the dust / oily water mixture. I requested that the facility immediately cease the discharge and collect the material for proper disposal. I also requested that the contaminated gravel be collected, containerized and properly disposed. One digital photograph was taken of the discharge area.

On April 12, 2010 Mr. Collins sent an email confirmation and digital photographs to demonstrate that the facility has properly excavated and containerized the area where oily water was released onto the ground. Mr. Collins explained that the containers will be disposed through Safety-Kleen as oil contaminated soil.

8. Site Deficiencies:

None

9. Recommendations / Comments:

- It was strongly recommended that the small containers of waste acids and waste caustics located in the fume hood within the Lab Room be segregated based on compatibility. The waste chemicals should be lab packed and properly disposed as soon as possible.
- It is a reminder that if the facility generates more than 220-pounds of hazardous waste in any calendar month the facility would be subject to all small quantity generator (SQG) requirements found at 40 CFR 262.34 (d).

 4/12/10
INSPECTOR (DATE)

SENT VIA US MAIL
FACILITY CONTACT

cc:
MRO Files
Brent Burch, Western Area Compliance Supervisor
Central Office Files
Doug Collins, Avdel USA, LLC

INSPECTION NOTES

NC DEPT OF ENVIRONMENT & NATURAL RESOURCES
DIVISION OF WASTE MANAGEMENT
HAZARDOUS WASTE SECTION

RCRA INSPECTION REPORT

- 1. **Facility Information:** Avdel ^{USA} Cherry, LLC
614 NC Hwy. 200 South
Stanfield, N.C. 28163
CESQG - NCD 101 779 726
- 2. **Facility Contact:** Lindsey Toole, EH&S Administrator
(704) 888-7156
DOUG COLLINS - ENG. P. M. W. G. M.
- 3. **Survey Participants:** Mrs. Lindsey Toole *GEORGE ADAMS - IHSB*
Mr. Sean Morris, Waste Management Specialist
DOUVA DECARLO - IHSB
- 4. **Date of Inspection:** May 18, 2006
3/25/10
- Date of Report:** May 19, 2006
- 5. **Purpose of Inspection:** To determine compliance with 40 CFR 260-279
- 6. **Facility Description:**

On May 18, 2006 I conducted a compliance inspection at Avdel Cherry, LLC located in Stanfield, NC. The facility has 155 employees, operates on ~~three~~ shifts, and is 88,259 square feet in size. The facility manufactures blind fasteners (rivets) for the automotive industry. The facility does not generate hazardous waste on a regular basis.

TWO SHIFTS - 7 DAYS

*TRACT
13.8 ACRES*

*40% AUTO
60% CONSUMI
GOODS*

*COMPARED TO MUNICIPAL
SYSTEMS*

*APPROX 100
EMP.*

7. **Area of Inspection:**

Manifests:

All used oil and universal waste is collected and disposed by ~~Heritage Environmental Services~~ and Safety-Kleen Systems. Manifests were available for used oil and universal waste collection.

Used Oil & Universal Waste:

The facility generates used oil from general maintenance of machinery at the facility. Used oil is collected in a 300-gallon mobile cart and then pumped into (2) 2500-gallon used oil tanks located in the Oil Room. Used oil is also collected in a 300-gallon tank used to collect residues from 55-gallon containers that previously held product oil. All tanks and containers of used oil were properly labeled at the

*• IHSB ASSESSMENT ONGOING
MW ON SITE. CW CONT.
CHL. SOLVENTS*

*- AIR
STRIPPERS
IN OPERATION*

*(2)
SOLAR
AIR FILT.
SYSTEM. VENT
TO AIR COND.
UNIT. DRAWS
TO OUTSIDE
ROOF DRAIN*

time of the inspection. The facility uses a chlorinated brake cleaner during routine maintenance. It is recommended that the facility use a non-chlorinated cleaner (see recommendation section).

The facility generates waste fluorescent lamps. There were (5) boxes of 4-foot waste lamps located in the Oil Room and (1) box of 4-foot lamps and (1) box of 8-foot lamps located in the Battery Charging Area. The containers were properly closed but were not properly labeled at the time of the inspection (see deficiency section). Employees are required to review company policies regarding universal waste management. Heritage collects and disposes of waste lamps and batteries. The last collection date was 1/30/06.

8. **Site Deficiencies:**

- 40 CFR 273.14 (e) - Avdel Cherry, LLC is in violation of this regulation in that there were (5) boxes of 4-foot waste lamps, located in the Oil Room, and (1) box of 4-foot lamps and (1) box of 8-foot lamps, located in the Battery Charging Area, and the containers were not properly labeled at the time of the inspection.

9. **Recommendations:**

- It is recommended that the facility use non-chlorinated cleaners to minimize the possibility of mixing a hazardous cleaner with the facility's used oil stream.

Oil / WATER SEPARATOR

INSPECTOR (DATE)

SENT VIA CERTIFIED MAIL
FACILITY CONTACT

cc:
MRO Files
Jesse Wells, Western Area Compliance Supervisor
Central Office Files
Lindsey Toole, Avdel Cherry, LLC

*2 - WASTES
S+K*

*• ABOVE GROUND
PIPE SUPP.
TANK*

*• SPIN KITS
• FIRE KIT.*

OIL ROOM FIRE EXT. SPILL KIT

(3) 2500 USED OIL TANKS
ALL THREE LABELS

1 PAINT WASHER
SJK - 150

(1) 175-GALLON USED OIL
COLLECT. FOR DRUM
DRAWAGE - LABELED

1 WASHER
OUTSIDE OF
OIL ROOM

(1) 55-GALLON WASTE
AEROSOLS - LABELED - KEEP CLOSED

SEVERAL CONT.
COLLECTED FOR > SAF
WASTE WIPER
10-GALLON

ALSO LAUND.
MAG
IN
GOOD
SHAPE

ALUM.
STEEL
STAPLES → COATING
OUT SOURCE

WIRE DRAWING
CUTTING
B + PART
ASSEMBLY

E-MAIL REQUEST

- WASTE PROFILE
- MOP ROOM EVAP. SOURCE
 - MOP WATER
 - PAPER
 - AEROSOLS
 - PARTS WASHING
- ASK FOR LOW FLOW

UW

- 1 - 8' BOX
- 3 - 4' BOXES
- 3 - 5-GALLON CONTAINERS OF USED BATTERIES

LAB

NOT OPERATIVE

SEVERAL SMALL CONTAINERS OF ALIQUOTS + BASES

NEED TO SEG. + LAB PACK - SEPARATE COMPART.

- CLOSE UW. DO NOT TANK
- CLEAN OIL - CONT. DISPOSE → NEED CONFIRM.
- STOP OILY DISCHARGE
- SEG. INCOMPAT. LAB PACK + DISPOSE
- RE-MOUNT

REQUEST
3/24/10
SJK 1 159 DOBS
EVENT 6-MONTHS

Morris, Sean

From: Collins, Doug [dcollins@acument.com]
Sent: Monday, March 29, 2010 2:35 PM
To: Morris, Sean
Cc: Gleason, Larry
Subject: RE: EPA Web site
Attachments: NCDENR_3_25_10_Corrective_action.ppt

Sean,
The gravel will be removed, collected for disposal on Tuesday. I will be monitoring the area afterwards to validate the effectiveness of our corrective action.

Regards,
Doug Collins
Engineering Manager
AVDEL®
an Acument™ Global Technologies Company
704/888-7110 Voice
704/888-7111 Fax
704/467-4025 Cell
dcollins@acument.com

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From: Morris, Sean [mailto:sean.morris@ncdenr.gov]
Sent: Monday, March 29, 2010 11:49 AM
To: Collins, Doug
Subject: RE: EPA Web site

Any word on the requested documents yet? I also need a confirmation that the discharge from the roof is being properly collected and that the gravel under the drain has been collected. Thanks, Sean

Sean Morris - Sean.Morris@ncdenr.gov
Environmental Senior Specialist
North Carolina Dept. of Environment & Natural Resources
Division of Waste Management - Hazardous Waste Section
610 E. Center Ave., Suite 301
Mooresville, NC 28115
Ph: 704.663.1699 Fax: 704.663.6040 www.wastenotnc.org

E-mail correspondence to and from this address may be subject to the
North Carolina Public Records Law and may be disclosed to third parties.

From: Collins, Doug [mailto:dcollins@acument.com]
Sent: Thursday, March 25, 2010 5:43 PM
To: Morris, Sean
Subject: EPA Web site



Sean,

I went to the website you provided and started to fill out the form. Do I need to update the Hazardous chemicals list from section 11? Do you have my current list?

Thanks for the help today.

Regards,

Doug Collins

Engineering Manager

AVDEL®

an Acument™ Global Technologies Company

704/888-7110 Voice

704/888-7111 Fax

704/467-4025 Cell

dcollins@acument.com

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BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable) **NCD101779726** Document No. **50417228** 2. Page 1 of 1

3. Shipper's Name and Mailing Address
AVDEL CHERRY LLC
614 NC 200 HWY
STANFIELD NC 28163

4. Shipper's Phone () **704-888-7140**

5. Transporter 1 Company Name **SAFETY-KLEEN SYSTEMS, INC.** 6. US EPA ID Number **TXR000050930** A. Transporter's Phone **972-265-2000**

7. Transporter 2 Company Name _____ 8. US EPA ID Number _____ B. Transporter's Phone _____

9. Designated Facility Name and Site Address **SAFETY-KLEEN SYSTEMS, INC.** 7403 10. US EPA ID Number **SCD077995488** C. Facility's Phone **803-356-4061**
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

11. Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. <input type="checkbox"/> HM NON-REGULATED LIQUID	3	DM	900	P
b. <input type="checkbox"/> HM USED OIL AND ABSORBENT MIXTURE (NOT USDOT HAZARDOUS MATERIAL)	1	DM	350	P
c. <input type="checkbox"/> HM				
d. <input type="checkbox"/> HM				

15. Special Handling Instruction and Additional Information
 SK SHIP# 200349198 2886681
 24 HR EMERGENCY #1-800-468-1760 (SAFETY-KLEEN - 94138
 A) NONE B) NONE
 SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY
 DOT/PRFL A. 400130/40158050 B. 401310/40139417 C. D.

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.
 Printed/Typed Name _____ Signature required here if US DOT regulated _____ Month _____ Day _____ Year _____

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.
 Printed/Typed Name **LARRY GLEASON** Sign here if material is not DOT regulated *Larry Gleason* Month **09** Day **17** Year **10**

17. Transporter 1 Acknowledgement of Receipt of Materials
 Printed/Typed Name **GREG WITTE** Signature *Greg Witte* Month **10** Day **17** Year **10**

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

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of materials covered by this form except as noted in Item 19.
 Printed/Typed Name *Aue Dumbke* Signature *Aue Dumbke* Month **3** Day **23** Year **10**

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

SHIPPER

USE 16A OR 16B

USE 16A OR 16B

TRANSPORTER

FACILITY



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
			10-13	23	50255276
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
				SVC. P/C	PROD. P/C
			LOCATION		TAX EXEMPTION NO.

GENERATOR BILL

2 8 8 6 6 8 1

Audel Cherry
614 NC 2001/11/14
SPARTAN, NC 28163

BILL

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
11/24/10	26366							

DEPT	SERVICE/PRODUCT	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS		CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS/INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	MSGS GIVEN
								CLEAN	SPENT							
1	52150	78699	1	99.01				15	15	717	12					
2	52150	98699	1	99.01				15	1							



TOTAL-SERVICE/PRODUCTS				198.02													
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	CHECK APPROPRIATE BOXES		MACHINE CONDITION & CLEANLINESS	MACHINE PROPERLY GROUNDED	YES	NO	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	YES	NO					
				LAMP ASSEMBLY CONDITION	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	<input type="checkbox"/>	<input type="checkbox"/>	FUSIBLE LINK INSTALLED	<input type="checkbox"/>	<input type="checkbox"/>					
				EMERGENCY CLOSING OF LID UNOBSTRUCTED	<input type="checkbox"/>	<input type="checkbox"/>	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>					

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)					12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	I-CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:			
Waste Com. Portable Linc. No. 5 (Hazardous Waste) UN 1993 (6.1)(1) (303)					1	DM	15	6	717	5	2	1
										0 TO 220 LBS./MONTH		
										220 LBS. TO 2,200 LBS./MONTH		
										GREATER THAN 2,200 LBS./MONTH		

DESIGNATED FACILITY NAME AND ADDRESS	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
2320 Parkway Dr Charlotte NC 28205		STATE ID NO. 11D11715920

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
	INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$
PREVIOUS CREDIT CARD NO.				

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

Print Customer Name

By: *[Signature]*
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN (FROM ABOVE)	
TOTAL DUE	198.02

DO NOT WRITE IN THE AREA BELOW

CREDIT CARD NO.	AMEX	EXP. DATE
	VISA	
	MC	
CUSTOMER REFERENCE INFORMATION		

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

THIS AGREEMENT CONTINUES ON THE REVERSE SIDE

SERVICE AND SALES ACKNOWLEDGMENT PART 1366 (Rev. 05/07)

PLANT: 7055 SAFETY-KLEEN 03/09/2010 PAGE: 1
GENERATOR NAME: AVDEL CHERRY LLC LDR NOTIFICATION FORM 12:55:23

SK Shipping #: 200252409 MANIFEST NO.: 50255270
OR SALES SERVICE NO.:
CUST#: 2886691
Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR part 268 land disposal restrictions (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRL NO. 0000150055
SKDDT#: 0000717

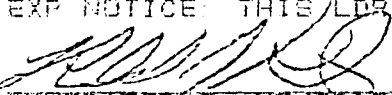
EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D039
Treatability group: NWW Non-Wastewater
Waste Constituent Notification:

Legend

Number	Constituent
001	BENZENE
002	TETRACHLOROETHYLENE
003	TRICHLOROETHYLENE
004	CADMIUM
005	CHROMIUM (TOTAL)
006	LEAD
007	MERCURY - ALL OTHERS

[Handwritten signature]

NOTES
EXP NOTICE: THIS LDR EXPIRES ON 12/31/2010

 GENERATOR'S AUTHORIZED SIGNATURE	<u>Ron Kirk Shuman</u> NAME & TITLE (PRINTED OR TYPED)	<u>3 / 24 / 2010</u> DATE
--	--	------------------------------

PLANT: 7055
TOP COPY: GENERATOR

CSG: 99 REF#: 50255270
MIDDLE COPY: FACILITY

SK: 201010
BOTTOM COPY: TRANSFER

PLANT: 7055 SAFETY-KLEEN 03/09/2010 PAGE: 1
GENERATOR NAME: AVDEL CHERRY LLC LDR NOTIFICATION FORM 12:55:23

SK Shipping #: 200252409 MANIFEST NO.: 50255270
OR SALES SERVICE NO.: 2886681
CUST#: 2886681
Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR part 268 land disposal restrictions (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PREF. NO.: 0000150055
SKDOT#: 0000717

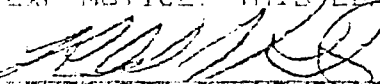
EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):

D039
Treatability group: NWW Non-Wastewater
Waste Constituent Notification:

Legend

Number	Constituent
007	BENZENE
029	TETRACHLOROETHYLENE
037	TRICHLOROETHYLENE
050	CADMIUM
051	CHROMIUM (TOTAL)
055	LEAD
057	MERCURY - ALL OTHERS

NOTES
EXP NOTICE: THIS LDR EXPIRES ON 12/31/2010

 GENERATOR'S AUTHORIZED NAME & TITLE
SIGNATURE (PRINTED OR TYPED) *Patrick Shady*
DATE *3/24/2010*

PLANT: 7055 CSO: 99 REF#: 50255270 SW: 201013
TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
					5041 7228
			CREDIT CODE	PREVIOUS BALANCE	*BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
				SVC. P/C	PROD. P/C
			LOCATION	TAX EXEMPTION NO.	

CUSTOMER GENERATOR

2 8 8 6 6 8 1

BILL TO

Avdel Cherry LLC
614 NE 200 Hwy
Stanfield NC 28163

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
3-16-10	20700		704-888-7153			.0775	.0775	.0775

DEPT	SERVICE/PRODUCT	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	MSDS GIVEN
								CLEAN	SPENT	# OF CONT.							
1	3206	4' @	5	49.92	23.21	322.73	268.94										
2	3207	8'	1	99.84	7.74	107.58											
3	822	Degreaser @ 311.00	2	622.00	48.21	670.21											
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11						1046.73											
12						1100.52											



TOTAL-SERVICE/PRODUCTS				430031	CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
------------------------	--	--	--	--------	-------------------------	---------------------------------	------	------	-----------------------------	-----	----	---------------------------	-----	----

USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	LAMP ASSEMBLY CONDITION	EMERGENCY CLOSING OF LID UNOBSTRUCTED	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA
----------------------------	----------------------------	------------------------	------------------------	-------------------------	---------------------------------------	---

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO. TYPE	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.
					0 TO 220 LBS./MONTH
					INITIALS
					220 LBS. TO 2,200 LBS./MONTH
					INITIALS
					GREATER THAN 2,200 LBS./MONTH
					INITIALS

DESIGNATED FACILITY NAME AND ADDRESS	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.	STATE ID NO.
--------------------------------------	---	----------------	--------------

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$	
PREVIOUS CREDIT CARD NO.				

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

Print Customer Name: LARRY BLATTEN

By: [Signature]
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	1046.73
TOTAL DUE	430031

DO NOT WRITE IN THE AREA BELOW

CREDIT CARD NO.	AMEX	VISA	MC	EXP. DATE
CUSTOMER REFERENCE INFORMATION				

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

THIS AGREEMENT CONTINUES ON THE REVERSE SIDE

SERVICE AND SALES ACKNOWLEDGMENT PART 1366 (Rev. 05/07)



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551

FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704 375 0090			10 12 99		50417228
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
CUSTOMER SEGMENT	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C	
54	214				
LOCATION			TAX EXEMPTION NO.		
STANFIELD, NC 28163 6749 US			7055		

CUSTOMER GENERATOR

B I L L T O

CUSTOMER NO. 2 8 8 6 6 8 1

AVDEL CHERRY LLC

614 NC 200 HWY

2886681
AVDEL CHERRY LLC
614 NC 200 HWY

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
			704 375 7149					

DEPT	SERVICE/PRODUCT	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	MSDS GIVEN	
								CLEAN	SPENT	# OF CONT.								
1	075400	40137417	1	01.00		01.00												
2	075400	40150050	3	01.00		03.00												
3	100001		1	11.00		11.00												
4	10044		1	0.00		0.00												
5																		
6																		
7																		
8																		
9																		
10																		
11																		
12																		



TOTAL-SERVICE/PRODUCTS	181.82	181.82	CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	LAMP ASSEMBLY CONDITION			FUSIBLE LINK INSTALLED			LOCAL PHONE NO. STICKER AFFIXED TO MACHINE		
NCD079060050		NCD101779726					EMERGENCY CLOSING OF LID UNOBSTRUCTED			SPENT SOLVENT MEETS ACCEPTANCE CRITERIA		

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:
USED OIL AND ABSORBENT MIXTURE (NOT USDOT HAZARDOUS MATERIAL)			Gal	401310	0 TO 220 LBS./MONTH
NON-REGULATED LIQUID			Gal	400130	220 LBS. TO 2,200 LBS./MONTH
					GREATER THAN 2,200 LBS./MONTH

DESIGNATED FACILITY NAME AND ADDRESS	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
		STATE ID NO.

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
	INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$
	PREVIOUS CREDIT CARD NO.			
CREDIT CARD NO.		AMEX	VISA	EXP. DATE
			MC	
CUSTOMER REFERENCE INFORMATION				

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

Print Customer Name: LARRY GLAZOV

By: [Signature]
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	343.82

DO NOT WRITE IN THE AREA BELOW



SERVICE AND SALES ACKNOWLEDGMENT PART 1366 (Rev. 05/07)



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551

FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER 50419062
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
CUSTOMER SEGMENT	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C	
54	214				
LOCATION			TAX EXEMPTION NO.		

2 8 8 6 6 8 1

BILL

Avdel Cherry LLC
614 Hwy 200 South
Stanfield NC 28163

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
3-17-10	20700		704-888-7140			.0775	.0775	.0775

DEPT	SERVICE/PRODUCT	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS) (INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	MSDS GIVEN
								CLEAN	SPENT	# OF CONT.							
1	876223	12341	1	101.00		101.00											
2	875515	40411062	1	930.00		930.00											
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	



TOTAL-SERVICE/PRODUCTS				1031.00	CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	LAMP ASSEMBLY CONDITION	FUSIBLE LINK INSTALLED	EMERGENCY CLOSING OF LID UNOBSTRUCTED						LOCAL PHONE NO. STICKER AFFIXED TO MACHINE		

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.
					0 TO 220 LBS./MONTH
					INITIALS _____
					220 LBS. TO 2,200 LBS./MONTH
					INITIALS _____
					GREATER THAN 2,200 LBS./MONTH
					INITIALS _____

DESIGNATED FACILITY NAME AND ADDRESS	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.	STATE ID NO.
--------------------------------------	---	----------------	--------------

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$
CREDIT CARD NO.	AMEX VISA MC	EXP. DATE		

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS ONLY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

Print Customer Name: LARRY GRASO

By: [Signature]
Customer's Authorized Representative

VISA
MasterCard
AMERICAN EXPRESS

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	1031.00
DO NOT WRITE IN THE AREA BELOW	

CUSTOMER REFERENCE INFORMATION

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

THIS AGREEMENT CONTINUES ON THE REVERSE SIDE

SERVICE AND SALES ACKNOWLEDGMENT
PART 1366 (Rev. 05/07)

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

NC0101779726

50417228

3. Shipper's Name and Mailing Address

AVDEL CHERRY LLC
614 NC 200 HWY
STANFIELD NC 28163

4. Shipper's Phone ()

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

SAFETY-KLEEN SYSTEMS, INC.

TX0000050930

972-265-2000

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

7403

10. US EPA ID Number

C. Facility's Phone

SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

SCD077995488

803-356-4061

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

HM

No.

Type

a. NON-REGULATED LIQUID

3

DM

900

P

b. USED OIL AND ABSORBENT MIXTURE
(NOT USDOT HAZARDOUS MATERIAL)

1

DM

350

P

15. Special Handling Instruction and Additional Information

SK SHIP# 200349198 2886681

24 HR EMERGENCY #1-800-468-1760 (SAFETY-KLEEN - 94138)

A) NONE B) NONE

SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY

DOT/PRFL A. 400130/40158050 B. 401310/40139417 C. D.

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

LARRY GIBSON

Larry Gibson

10/3/10

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

GREG WITTE

Greg Witte

11/17/10

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

NC0101779726

947778

3. Shipper's Name and Mailing Address

AVDEL CHERRY LLC
614 NC 200 HWY
STANFIELD NC 28163

4. Shipper's Phone ()

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

SAFETY-KLEEN SYSTEMS, INC

TX0000050930

972-265-2000

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

CLEANLITES RECYCLING SOUTH LLC
195 BEN ABI RD
SPARTANBURG SC 29307

SCR000767814

864-503-9900

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

HM

a. UNIVERSAL WASTE LAMPS
NOT USDOT REGULATED

5 CF 240 P

b.

c.

d.

15. Special Handling Instruction and Additional Information

SK SHIP# 200349231 2886681

24 HR EMERGENCY #1-800-468-1760 (SAFETY-KLEEN - 94138

A) NONE
SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY

DOT/PRFL A. 11130/150279 B. C. D.

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

LARRY GLEASON

[Signature]

03/17/10

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

GREG WITTE

[Signature]

3/17/10

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

SHIPPER

USE OR 16B

TRANSPORTER

FACILITY

USE OR 16B

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

NC0101779726

50419007

3. Shipper's Name and Mailing Address

AVDEL CHERRY LLC
614 NC 200 HWY
STANFIELD NC 28163

4. Shipper's Phone ()

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

SAFETY-KLEEN SYSTEMS, INC.

TXR000050930

972-265-2000

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

7407

10. US EPA ID Number

C. Facility's Phone

SAFETY-KLEEN SYSTEMS, INC.
633 E 138TH ST
DOLTON, IL 60419

ILD980613913

708-225-8100

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a.	HM	Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
			No.	Type		
		NON REGULATED MATERIAL (NON PCB BALLASTS)	1	2P	50	P
b.						
c.						
d.						

15. Special Handling Instruction and Additional Information

SK SHIP# 200349267 2886681

24 HR EMERGENCY #1-800-468-1760 (SAFETY-KLEEN - 94138

A) NONE
SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY

DOT/PRFL A. 400051/12341 B. C. D.

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

**IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)**

SHIPPER

USE OR 16B

TRANSPORTER

FACILITY

USE OR 16B

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

NC0101779726

949062

3. Shipper's Name and Mailing Address

AVDEL CHERRY LLC
614 NC 200 HWY
STANFIELD NC 28163

4. Shipper's Phone ()

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

SAFETY-KLEEN SYSTEMS, INC

TX0000050930

972-265-2000

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

CLEANLITES RECYCLING SOUTH LLC
195 BEN ABI RD
SPARTANBURG SC 29307

SCR000767814

864-503-9900

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

HM

No.

Type

Quantity

Unit

a. RG ENVIRONMENTALLY HAZARDOUS SUBSTANCES,
SOLID, N.O.S. (MERCURY, LEAD) 9 UN3077
PG III (UNIVERSAL WASTE-E SCRAP)

1

CF

600

P

b.

c.

d.

15. Special Handling Instruction and Additional Information

SK SHIP# 200349253 2886681

24 HR EMERGENCY #1-800-468-1760 (SAFETY-KLEEN - 94138

A) NONE

SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY

DOT/PRFL A. 6977907/40411062 B. C. D.

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

LARRY WITTE

[Signature]

3 17 10

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

GREG WITTE

[Signature]

3 17 10

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

**IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)**

SHIPPER

USE 16A OR 16B

USE 16A OR 16B

TRANSPORTER FACILITY



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
				3	50293091
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
			A-9		
			SVC. P/C	PROD. P/C	0839
			LOCATION	TAX EXEMPTION NUMBER	

GENERATOR CUSTOMER

2 8 8 6 6 8 1

AVDEL CHERRY LLC
614 NC 200 Hwy
STANFIELD, NC 28163

BILL TO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
3/4/200	2-1188		704-886-7140					

DEPT	SERVICE/PRODUCT	SURVEY NUMBER	UNIT PRICE	QUANTITY	CHARGE	SALES TAX	TOTAL CHARGE	CHLORINE TEST RESULTS		SK DOT NUMBER	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (Y WW)	PROMO NO.	RELEASE NO.
								HALOGEN TESTER PASS	FAIL							
1	626674		.35	2827			989.45	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0.250	401057	52				
2																
3																
4																
5																
6																
7																
8																
9																

TOTAL-SERVICE/PRODUCTS							989.45	TANK CAPACITY	5000	TRANSPORTER	DATE	3/4/200	
GENERATOR STATUS: CHECK ONLY ONE BOX BELOW										SafetyKleen	X	Christina	
GENERATOR: HAZARDOUS WASTE CLASSIFICATION *	VEHICLE FLUIDS ONLY	OTHER NON-VEHICLE FLUIDS	1 NO PREQUAL REQUIRED, NO HALOGEN TEST				MANIFEST NO.	USEPA TRANSPORTER ID NO.					
CESQG	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 3	2 NO PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP										
SQG/LQG	<input type="checkbox"/> 2	<input type="checkbox"/> 4	3 PREQUAL REQUIRED, NO HALOGEN TEST				GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.					
			4 PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP				MD10177926						
* REFER TO REVERSE SIDE FOR DEFINITIONS										SafetyKleen	X	Christina	

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER
USED OIL (NOT US DOT HAZARDOUS MATERIAL)	1	TT 2827	G	401057



INTERMEDIATE FACILITY NAME AND ADDRESS: SAFETY KLEEN SYSTEMS
USA EPA ID NO. NCR000006775
STATE ID NO.

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	INVOICE #	AMOUNT \$	INVOICE #
CREDIT CARD NO.	AMEX	VISA	EXP. DATE
CUSTOMER REFERENCE INFORMATION			

IN THE EVENT OF AN EMERGENCY CALL
1-800-488-1760 (24 hours)

CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION.

Customer certifies 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 U.S. Environmental Protection Agency and the U.S. Department of Transportation.

ADDITIONAL TERMS AND CONDITIONS ON THE REVERSE SIDE OF THIS DOCUMENT ARE INCORPORATED HERewith MADE A PART HEREOF.

Print Name: Mark Frigg
GENERATOR/SHIPPER DESIGNATED REPRESENTATIVE SIGNATURE

Logos: VISA, MasterCard, AMERICAN EXPRESS

TOTAL DUE: 989.45
DO NOT WRITE IN THE AREA BELOW

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

OIL RECOVERY SERVICE/SALES ACKNOWLEDGMENT



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
				3	50293094
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
			A-9		2340
			LOCATION	TAX EXEMPTION NUMBER	

GENERATOR
CUSTOMER

2 8 8 6 6 8 1

ABDEL CHERRY LLC
614 NC 200 HWY
STANFIELD, NC 28163

BILL

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
3/5/2010	27188		704-888-7140					

DEPT	SERVICE/PRODUCT	SURVEY NUMBER	UNIT PRICE	QUANTITY	CHARGE	SALES TAX	TOTAL CHARGE	CHLORINE TEST RESULTS		SK DOT NUMBER	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (YY WW)	PROMO NO.	RELEASE NO.	
								HALOGEN TESTER PASS	FAIL								CHLOR D-TECT RESULTS (PPM)
1	66674		1.35	1450			<507.50>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0-250	cm	401057					
2								<input type="checkbox"/>	<input type="checkbox"/>								
3								<input type="checkbox"/>	<input type="checkbox"/>								
4								<input type="checkbox"/>	<input type="checkbox"/>								
5								<input type="checkbox"/>	<input type="checkbox"/>								
6								<input type="checkbox"/>	<input type="checkbox"/>								
7								<input type="checkbox"/>	<input type="checkbox"/>								
8								<input type="checkbox"/>	<input type="checkbox"/>								
9								<input type="checkbox"/>	<input type="checkbox"/>								

TOTAL-SERVICE/PRODUCTS				<507.50>	TANK CAPACITY	5000	TRANSPORTER	DATE > 3/5/2010
GENERATOR STATUS: CHECK ONLY ONE BOX BELOW				MANIFEST NO.	USEPA TRANSPORTER ID NO.	Safety Kleen X <i>Chittman</i>		
GENERATOR: HAZARDOUS WASTE CLASSIFICATION *	VEHICLE FLUIDS ONLY	OTHER NON-VEHICLE FLUIDS	1 NO PREQUAL REQUIRED, NO HALOGEN TEST 2 NO PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP 3 PREQUAL REQUIRED, NO HALOGEN TEST 4 PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP * REFER TO REVERSE SIDE FOR DEFINITIONS	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	Safety Kleen X <i>Chittman</i>		
CESQG	<input type="checkbox"/> 1	<input type="checkbox"/> 3		NCB101779726		Safety Kleen X <i>Chittman</i>		
SQG/LQG	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 4				Safety Kleen X <i>Chittman</i>		

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)				12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER
USED OIL (NOT USDOT HAZARDOUS MATERIAL)				1 TT	1450	G	401057



INTERMEDIATE FACILITY NAME AND ADDRESS SAFETY KLEEN SYSTEMS
USA EPA ID NO. NCR000006775
STATE ID NO.

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	INVOICE #	AMOUNT \$	INVOICE #
			AMOUNT \$
CREDIT CARD NO.	AMEX VISA MC	EXP. DATE	
CUSTOMER REFERENCE INFORMATION			

MANIFEST CODE SEQ #

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION.

Customer certifies 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 U.S. Environmental Protection Agency and the U.S. Department of Transportation.

ADDITIONAL TERMS AND CONDITIONS ON THE REVERSE SIDE OF THIS DOCUMENT ARE INCORPORATED HERewith MADE A PART HEREOF.

Print Name *LARRY GLASSON*
Generator/Shipper Designated Representative Signature *Larry Glasson*

VISA
MasterCard
AMERICAN EXPRESS

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

TOTAL DUE <507.50>
DO NOT WRITE IN THE AREA BELOW

OIL RECOVERY SERVICE/SALES ACKNOWLEDGMENT



CUSTOMER NO.

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0090	STEVE HETU				M006286987
CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS			
CUSTOMER SEGMENT	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C	
LOCATION			TAX EXEMPTION NO.		

0 9 8 6 6 8 1

Model Cherry
 614 NC 200 Hwy
 Stanfield, NC 28163

B
I
L
L

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
26-10	030709	M 211555	704-375-7140			0275	0075	0275

SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS				CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH DATE (YY WW)	INV. CODE	PROMO NO.	MSDS GIVEN
								CLEAN	SPENT	# OF CONT.	SK DOT							
822			3	34.00	21.10	335.10												
				939.00	72.90													



231452-630

TOTAL-SERVICE/PRODUCTS						1005.30												
------------------------	--	--	--	--	--	---------	--	--	--	--	--	--	--	--	--	--	--	--

USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
TXR000050930			

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5103055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:
WASTE COMBUSTIBLE LIQUID, N. D. S. (PETROLEUM NAPHTHA) NA1993 PG III (D039) (ERG#129) 6.7LBS/GAL				717		0 TO 220 LBS./MONTH
USED CLEANING COMPOUNDS (PETROLEUM NAPHTHA) (NOT USDOT OR USEPA REGULATED) (150 SOLVENT)				557		220 LBS. TO 2,200 LBS./MONTH
USED CLEANING COMPOUNDS, N. O. I. B. N. (NOT USDOT OR USEPA REGULATED) AQUEOUS PW SOLUTION (0.3#/G)				941		GREATER THAN 2,200 LBS./MONTH

DESIGNATED FACILITY NAME AND ADDRESS	USA EPA ID NO.
SAFETY-KLEEN SYSTEMS, INC.	

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE
			<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
	INVOICE #	AMOUNT \$	INVOICE #

MANIFEST NO.
LDR MESSAGE
MANIFEST CODE
SEQ #

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

Print Customer Name: LARRY BLANSON

By: [Signature]
 Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	1005.30
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	335.10

DO NOT WRITE IN THE AREA BELOW

CREDIT CARD NO.	AMEX	EXP. DATE
	VISA	
	MC	

CUSTOMER REFERENCE INFORMATION

IN THE EVENT OF AN EMERGENCY CALL
 1-800-468-1760 (24 hours)

THIS AGREEMENT CONTINUES ON THE REVERSE SIDE

M006286987
 020700

SERVICE AND SALES ACKNOWLEDGMENT
 PART 1366 (Rev. 05/07)

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

NCB10177972C

717.11

3. Shipper's Name and Mailing Address

AVDEL CHERRY LLC
614 NC 200 HWY

4. Shipper's Phone (704 988-7140

STANFIELD

NC 28163

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

SAFETY-KLEEN SYSTEMS, INC

TXR000050030

704 375 0000

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

10. US EPA ID Number

SCD077995488

C. Facility's Phone

803 356-4061

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a.	HM	Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
			No.	Type		
		NON-REGULATED LIQUID	2	DM	600	P
b.						
c.						
d.						

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760(24 HR). MFST R/T#111275796 0002-8866-81
A) NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 23136 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
			CREDIT CODE	PREVIOUS BALANCE	1006091711
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
			SVC. P/C	PROD. P/C	
			LOCATION	TAX EXEMPTION NO.	

GENERATOR CUSTOMER

APPEL Cherry
614 NC 200 416428163
5754163

BILL TO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
1/28/10		11M 211757						

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS/INITIAL)	CHANGE SCH DATE (YY WW)	INV. CODE	PROMO NO.	MSDS GIVEN	
									CLEAN	SPENT	# OF CONT.								
1																			
2		40158050		2	81.00														
3		(5754163)																	



TOTAL-SERVICE/PRODUCTS							162.00												
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	CHECK APPROPRIATE BOXES		GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO						
								FUSIBLE LINK INSTALLED			LOCAL PHONE NO. STICKER AFFIXED TO MACHINE								
								LAMP ASSEMBLY CONDITION			SPENT SOLVENT MEETS ACCEPTANCE CRITERIA								

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)										12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:				
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993													801	0 TO 220 LBS./MONTH				
USED CLEANING COMPOUNDS (PETROLEUM NAPHTHA) (NOT USDOT OR USEPA REGULATED) (100% SOLVENT)													557	INITIALS				
USED CLEANING COMPOUNDS, N.O.S. (NOT USDOT OR USEPA REGULATED) AQUEOUS PW SOLUTION (8.3#/G)													941	220 LBS. TO 2,200 LBS./MONTH				
														GREATER THAN 2,200 LBS./MONTH				
														INITIALS				

DESIGNATED FACILITY NAME AND ADDRESS	SAFETY-KLEEN SYSTEMS, INC.	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
			STATE ID NO.

PAYMENT REMOVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
	INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$
	PREVIOUS CREDIT CARD NO			

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

Print Customer Name: LARRY G. GARCIA

By: [Signature]
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	162.00

DO NOT WRITE IN THE AREA BELOW

CREDIT CARD NO.	AMEX	VISA	MC	EXP. DATE
CUSTOMER REFERENCE INFORMATION				

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

THIS AGREEMENT CONTINUES ON THE REVERSE SIDE

1006091711
026366

SERVICE AND SALES ACKNOWLEDGMENT PART 1366 (Rev. 05/07)

454474-R5732
LOCATION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

12/05/09 PAGE: 1
07:23:56

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 40444448

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000717

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D039

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 250 CADMIUM
- 251 CHROMIUM (TOTAL)
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 67 BENZENE

NOTES

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2010

[Signature]
GENERATOR'S AUTHORIZED
SIGNATURE

SCOTTIE COX ENV TECH
NAME & TITLE
(PRINTED OR TYPED)

1-15-10
DATE

SEQ#: 6916 LOC: 203101

TERR: 20 REPR: 40444448 SW: 1001

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

MS9474-R5732
LOCATION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

12/05/09 PAGE: 1
07:23:56

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 4044444B

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

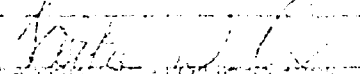
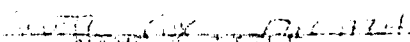
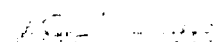
LDR FORM LINE NO 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO 0000
EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY): 0000717

DOBS
TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT IDENTIFICATION:

- 229 TETRACHLOROETHYLENE
- 231 TRICHLOROETHYLENE
- 250 CADMIUM
- 251 CHROMIUM (TOTAL)
- 255 LEAD
- 257 MERCURY - ALL ISOTHERMS
- 67 BENZENE

NOTE
EXP NOTICE: THIS LDR EXPIRES ON 12/31/2010

GENERATOR'S AUTHORIZED SIGNATURE NAME & TITLE DATE

(PRINTED OR TYPED)

SECTION 6.15 LDR 303101 TERM: 03 REPR 0000000000000000

1st COPY: GENERATOR MIDDLE COPY: FACILITY 3RD COPY: TRANSPORTER

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.07750 614 NC 200 HWY
CONS TAX: 0.07750
PRODUCT TAX: 0.07750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NBR 004044448
SRVC WEEK: 10-03
SRVC DATE: 01/15/10 08:44
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
52150 MDL 52 W/PRM SOLVENT S/N 88699 CLEAN 15 SERVICE TERM 12 SPENT 15	1	99.0100	7.67	106.68
52150 MDL 52 W/PRM SOLVENT S/N 78699 CLEAN 15 SERVICE TERM 12 SPENT 0	1	99.0100	7.67	106.68
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100001 FEE, FUEL SURCHARGE	1	11.4900	0.89	12.38
TOTAL SERVICE/PRODUCTS		217.5100	16.23	233.74

USEPA TRANSPORTER 1 IXR000050930
USEPA TRANSPORTER 2
FORM CODE DP

GENERATOR USEPA NLD0101779/26
GENERATOR STATE

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA)NA1993 PGIII
(0039) (ERG#128)

TOTAL CONT 1 TYPE DM TIL QTY 15 UNIT WT/VOL G SKD01 717
CNT# 91205012563 QTY 15

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE
CHARLOTTE,

NC 28205

USEPA ID NO NCD079060059
STATE ID NO

TOTAL CHARGE 233.74
WASTE MIN 0.00
TOTAL DUE 233.74

UNPAID BALANCE THIS RECEIPT 233.74

- Machine clean and good condition? Yes
- Decals in place and legible? Yes
- Fusible link installed? Yes
- Emergency closing of lid unobstructed? Yes
- Machine properly grounded? Yes
- Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
220 - 2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

X *Scatter W Cox*

SIGNATURE NAME: scott



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
04-375-0098	STEVE HETU		09		M006053510
CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS			
CUSTOMER SEGMENT	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C	
LOCATION			TAX EXEMPTION NUMBER		
303101					

GENERATOR

2886681

Andel Cherry
614 NC 200 Hwy
Stanfield, NC 28163

BILL

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
10/13/15	008389		704888714		OR			

DEPT	SERVICE/PRODUCT	SURVEY NUMBER	UNIT PRICE	QUANTITY	CHARGE	SALES TAX	TOTAL CHARGE	CHLORINE TEST RESULTS		SK DOT NUMBER	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (YY WW)	PROMO NO.	RELEASE NO.
								HALOGEN TESTER PASS FAIL	CHLOR-D-TECT RESULTS (PPM) TESTERS INITIALS							
1	66624			3750				<input type="checkbox"/>	<input type="checkbox"/>	1560						
2								<input type="checkbox"/>	<input type="checkbox"/>							
3	10046							<input type="checkbox"/>	<input type="checkbox"/>							
4								<input type="checkbox"/>	<input type="checkbox"/>							
5								<input type="checkbox"/>	<input type="checkbox"/>							
6								<input type="checkbox"/>	<input type="checkbox"/>							
7								<input type="checkbox"/>	<input type="checkbox"/>							
8								<input type="checkbox"/>	<input type="checkbox"/>							
9								<input type="checkbox"/>	<input type="checkbox"/>							

TOTAL-SERVICE/PRODUCTS	TANK CAPACITY	TRANSPORTER	DATE
		<i>Scottie W. Cox</i>	10/13/15
GENERATOR STATUS: CHECK ONLY ONE BOX BELOW		MANIFEST NO.	USEPA TRANSPORTER ID NO.
GENERATOR: HAZARDOUS WASTE CLASSIFICATION *	VEHICLE FLUIDS ONLY	OTHER NON-VEHICLE FLUIDS	1 NO PREQUAL REQUIRED, NO HALOGEN TEST
CESQG	<input type="checkbox"/> 1	<input type="checkbox"/> 3	2 NO PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP
SQG/LQG	<input type="checkbox"/> 2	<input type="checkbox"/> 4	3 PREQUAL REQUIRED, NO HALOGEN TEST
			4 PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP
			* REFER TO REVERSE SIDE FOR DEFINITIONS
		GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
		TXR000050930	
		FACILITY	DATE
		<i>Scottie W. Cox</i>	10/13/15
		PRINT NAME	SIGNATURE

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER
USED OIL (NOT USDOT HAZARDOUS MATERIAL)	081 TI	3750	6	850 1001
USED OIL AND WATER MIXTURE (NOT USDOT HAZARDOUS MATERIAL.)				921
USED ANTIFREEZE (NOT USEPA OR USDOT REGULATED)				1176



INTERMEDIATE FACILITY NAME AND ADDRESS	USA EPA ID NO.
SAFETY-KLEEN SYSTEMS, INC. 1704 D Goodrich Blvd Stanfield NC 28163	NC1000006710
	STATE ID NO.

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	INVOICE #	AMOUNT \$	INVOICE #
			AMOUNT \$
CREDIT CARD NO.	AMEX	VISA	EXP. DATE

MANIFEST CODE	SEQ #
	4 11

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION.	TOTAL DUE
Customer certifies 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 U.S. Environmental Protection Agency and the U.S. Department of Transportation.	DO NOT WRITE IN THE AREA BELOW
ADDITIONAL TERMS AND CONDITIONS ON THE REVERSE SIDE OF THIS DOCUMENT ARE INCORPORATED HERewith MADE A PART HEREOF.	M006053510
Print Name: <i>Scottie W. Cox</i>	008389
<input checked="" type="checkbox"/> GENERATOR/SHIPPER DESIGNATED REPRESENTATIVE SIGNATURE	

SFF REVERSE SIDE FOR IMPORTANT INFORMATION

PART NO. 1353 (05/07)

OIL RECOVERY SERVICE/ SALES ACKNOWLEDGMENT



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FID. ID NO. 396090019

CUSTOMER

CUSTOMER NO.

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK -91	SCHEDULED TERRITORY 23	REFERENCE NUMBER M006014464
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
CUSTOMER SEGMENT 9	CHAIN 214	OUTER COUNTY	SVC. P/C	PROD. P/C	
LOCATION			TAX EXEMPTION NO.		

GENERATOR

2 8 8 0 6 8 1

APPEL Chem
614M 203 HWY
5MPFIELD, NC

BILL TO

SERVICE DATE 10/17/01	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
--------------------------	---------------	----------------------	------------------	----------	------------------------	-------------	--------------	-------------

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH DATE (YY WW)	INV CODE	PROMO NO.	MSDS GIVEN	
									CLEAN	SPENT	# OF CONT.								SK DOT
1																			
2	52150	58699		1	99.01	7.07	106.08												
3	52150	78679		1	99.01	7.07	106.08												



TOTAL-SERVICE/PRODUCTS				217-86		CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	LAMP ASSEMBLY CONDITION	FUSIBLE LINK INSTALLED	EMERGENCY CLOSING OF LID UNOBSTRUCTED	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA							

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)											12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:	
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993											8	6	801	5163055	0 TO 220 LBS./MONTH	
USED CLEANING COMPOUNDS (PETROLEUM NAPHTHA) (NOT USDOT REGULATED)(150 SOLVENT)													557		220 LBS. TO 2,200 LBS./MONTH	
USED CLEANING COMPOUNDS, N.O.I.B.N. (NOT USDOT OR USEPA REGULATED)AQUEOUS PW SOLUTION (8.3476)													941		GREATER THAN 2,200 LBS./MONTH	

DESIGNATED FACILITY NAME AND ADDRESS 2920 Vanden... SAFETY-KLEEN SYSTEMS, INC.											I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.		USA EPA ID NO.		STATE ID NO.	
---	--	--	--	--	--	--	--	--	--	--	---	--	----------------	--	--------------	--

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
	INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

Print Customer Name: **ROBERT E. MULLINS**

By: *[Signature]*
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	217-86

DO NOT WRITE IN THE AREA BELOW

CREDIT CARD NO.	AMEX VISA MC	EXP. DATE
CUSTOMER REFERENCE INFORMATION		

IN THE EVENT OF AN EMERGENCY CALL
1-800-488-1760 (24 hours)

THIS AGREEMENT CONTINUES ON THE REVERSE SIDE

M006014464
026366

SERVICE AND SALES ACKNOWLEDGMENT PART 1-366 (Rev. 05/07)

54474-R5732
LOCATION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

09/12/09 PAGE: 1
07:23:32

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 39903779

CUST#: 0002-8846-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO: 0000
EADDT#: 0000901

HA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LIQUID >= 10% TOC
D016
D009
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 250 CADMIUM
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 57 BENZENE



NOTE

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2009

GENERATOR'S AUTHORIZED SIGNATURE

ROBERT L. PAULSON
NAME & TITLE
(PRINTED OR TYPED)

9 7 09
DATE

NO. 7318 LOG. 01101

FORM: 23 REV. 03/03/79 SW 1111

FOR COPY GENERATOR MIDDLE COPY FACILITY FOR COPY (NAME)

94474-R5732
LOCATION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

09/12/09 PAGE: 1
07:23:32

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
DR SALES SERVICE NO.: 39903779

CUST# 0002-8266-51

URGENT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
ASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

DR FORM LINE NO: 1 MANIFEST PAGE/LINE# 01/001 SK PFL NO 0000
540076 0000001

HA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LIQUID >= 10% TOC
D018
D067
D090

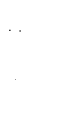
RETAILABILITY GROUP: NONWASTEWATERS

ASTE CONSTITUENT NOTIFICATION

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM
O-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM
M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 250 CADMIUM
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 67 BENZENE

NOTES

THIS NOTICE MUST BE EXPIRES ON 12/31/2009


SIGNATURE

ROBERT L. MULLEN
NAME & TITLE
(PRINTED OR TYPED)

9 7 09
DATE

EQ# 7418 LDC 1101

TEAR TO REVEAL SERIAL NO.

FOR YOUR GENERATOR

MIDDLE COPY FACILITY

FOR THE USE OF THE



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
104-375-0098	STEVE HETU		09		M00597199
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
			SVC. P/C	PROD. P/	
			LOCATION	TAX EXEMPTION NUMBER	
			303101		

GENERATOR CUSTOMER

2886081

Avdell Cherry Textron
Attn: Harold Lucas
614 W.C. Hwy 200
Streetville, W.C. 28163

BILL TO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
9-4-09	431018		704-249-7104		08			

DEPT	SERVICE/PRODUCT	SURVEY NUMBER	UNIT PRICE	QUANTITY	CHARGE	SALES TAX	TOTAL CHARGE	CHLORINE TEST RESULTS		SK DOT NUMBER	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (YY WW)	PROMO NO.	RELEASE NO.
								HALOGEN TESTER PASS / FAIL	CHLOR-D-TECT RESULTS (PPM)							
1	66666	3225069	.65	2500	1625.00	W/C	1625.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>	12700		16				
2	10971	621010		2500				<input type="checkbox"/>	<input type="checkbox"/>	12700		16				
3	10918	Truck	65.00	2	130.00	W/C	130.00	<input type="checkbox"/>	<input type="checkbox"/>							
4	10000	Wash/Surge	10.50	1	10.50	W/C	10.50	<input type="checkbox"/>	<input type="checkbox"/>							
5								<input type="checkbox"/>	<input type="checkbox"/>							
6								<input type="checkbox"/>	<input type="checkbox"/>							
7								<input type="checkbox"/>	<input type="checkbox"/>							
8								<input type="checkbox"/>	<input type="checkbox"/>							
9								<input type="checkbox"/>	<input type="checkbox"/>							

TOTAL SERVICE/PRODUCTS	TANK CAPACITY	TRANSPORTER	DATE
	3000	Ray McKeig	9/4/09
GENERATOR STATUS: CHECK ONLY ONE BOX BELOW		MANIFEST NO.	USEPA TRANSPORTER ID NO.
<input checked="" type="checkbox"/> CESQG <input type="checkbox"/> SQG/LQG		XXXX	TXR000050930
<input type="checkbox"/> 1 <input type="checkbox"/> 2		GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
<input type="checkbox"/> 3 <input type="checkbox"/> 4		Ray McKeig	9/4/09
* REFER TO REVERSE SIDE FOR DEFINITIONS		Ray McKeig	9/4/09

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER
USED OIL (NOT USDOT HAZARDOUS MATERIAL)				850
USED OIL AND WATER MIXTURE (NOT USDOT HAZARDOUS MATERIAL)	01 T	2500 G	12700	927
USED ANTIFREEZE (NOT USEPA OR USDOT REGULATED)				1170

INTERMEDIATE FACILITY NAME AND ADDRESS: SAFETY-KLEEN SYSTEMS, INC.
 5400 Legacy Drive, Cluster II, B3, Plano, TX 75024
 USA EPA ID NO. TXR0000135870
 STATE ID NO.

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	INVOICE #	AMOUNT \$	INVOICE #
			AMOUNT \$
CREDIT CARD NO.	AMEX	VISA	EXP. DATE
	MC		
CUSTOMER REFERENCE INFORMATION			

CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION.	
Customer certifies 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 U.S. Environmental Protection Agency and the U.S. Department of Transportation.	
ADDITIONAL TERMS AND CONDITIONS ON THE REVERSE SIDE OF THIS DOCUMENT ARE INCORPORATED HERewith MADE A PART HEREOF.	
Print Name: HARRY GLEASON	
MANIFEST CODE	SEQ #
	20

IN THE EVENT OF AN EMERGENCY CALL
 1-800-468-1760 (24 hours)

TOTAL DUE	\$1765.00
DO NOT WRITE IN THE AREA BELOW	
M005971993	
431018	
SEE REVERSE SIDE FOR IMPORTANT INFORMATION	

OIL RECOVERY SERVICE/ SALES ACKNOWLEDGMENT





5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704 375 0098 STEVE METU					M005891071
CREDIT CODE	PREVIOUS BALANCE		BAL. OVER 60 DAYS		
CUSTOMER SEGMENT	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C	
LOCATION			TAX EXEMPTION NO.		

GENERATOR

2886681

Ardell cherry
614 NC Hwy/200
Stan Field NC 28163

BILL TO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
8/13/09	867511918		704-888-7140					

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS		CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS/INITIAL)	CHANGE SCH. DATE (YY WW)	RV CODE	PROMO NO.	MSDS GIVEN	
									CLEAN	SPENT								# OF CONT.
1																		
2	822			2	622.00	41.99	663.99											
3																		
4																		
5																		
6																		
7																		
8																		
9																		
10																		
11																		
12																		



TOTAL-SERVICE/PRODUCTS				622.00	41.99	663.99												
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	CHECK APPROPRIATE BOXES		MACHINE CONDITION & CLEANLINESS	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO				
						LAMP ASSEMBLY CONDITION			FUSIBLE LINK INSTALLED			LOCAL PHONE NO. STICKER AFFIXED TO MACHINE						
									EMERGENCY CLOSING OF LID UNOBSTRUCTED			SPENT SOLVENT MEETS ACCEPTANCE CRITERIA						

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)											12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.				
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PG 111 (D039)(ERG#128) 6.7 LBS/GAL														717	336.015	0 TO 220 LBS./MONTH			
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PG 111 RQ (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)														801		220 LBS. TO 2,200 LBS./MONTH			
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE) UN3267 PG111(D006, D018, D027, D039, D040)(ERG153) 7.97/G														14950		GREATER THAN 2,200 LBS./MONTH			

DESIGNATED FACILITY NAME AND ADDRESS	SAFETY-KLEEN SYSTEMS, INC.	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
			STATE ID NO.

PAYMENT RECEIVED	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE	
			<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS	
	INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$
PREVIOUS CREDIT CARD NO.				
CREDIT CARD NO.		AMEX	VISA	EXP. DATE
		MC		
CUSTOMER REFERENCE INFORMATION				

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #
	6-0

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

Print Customer Name: SCOTTE COX

By: Scott J. Cox
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	663.99
DO NOT WRITE IN THE AREA BELOW.	
M005891071	006800

THIS AGREEMENT CONTINUES ON THE REVERSE SIDE

SERVICE AND SALES ACKNOWLEDGMENT PART 1366 (Rev. 05/07)



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098 STEVE HETO			10/10/09		1039695776
CREDIT CODE	PREVIOUS BALANCE			BAL. OVER 60 DAYS	
CUSTOMER SEGMENT	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C	
LOCATION	TAX EXEMPTION NO.				

GENERATOR

BILL TO

AVDEL CHERRY LLC
614 NC 200 HWY
STANFIELD NC 28163

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
8/13/09	7918							

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS/INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	RELEASE NO.	MSDS GIVEN
									CLEAN	SPENT	# OF CONT.								
	088888	0139417	81.0000	4	324.00	-	324.00						52						
	088888	0158050	81.0000	4									52						
	010044			1	8.00	0.00	8.00	0.00					0						
	0100007			1	10.83	0.00	10.83	0.00					0						

TOTAL-SERVICE/PRODUCTS				42383		CHECK APPROPRIATE BOXES		GOOD POOR		DECALS IN PLACE AND LEGIBLE		YES NO		MACHINE PROPERLY GROUNDED		YES NO	
USEPA TRANSPORTER 1 ID NO.		USEPA TRANSPORTER 2 ID NO.		GENERATOR USEPA ID NO.		GENERATOR STATE ID NO.		MACHINE CONDITION & CLEANLINESS		FUSIBLE LINK INSTALLED		EMERGENCY CLOSING OF LID UNOBSTRUCTED		LOCAL PHONE NO. STICKER AFFIXED TO MACHINE		SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)											12. CONTAINERS NO.		13. TOTAL QUANTITY		14. UNIT WT/VOL		SK DOT NUMBER		5163095		I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.	
A.																					0 TO 220 LBS./MONTH	
B.																					220 LBS. TO 2,200 LBS./MONTH	
C.																					GREATER THAN 2,200 LBS./MONTH	
D.																					INITIALS	

DESIGNATED FACILITY NAME AND ADDRESS											I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.											USA EPA ID NO.		STATE ID NO.	
--------------------------------------	--	--	--	--	--	--	--	--	--	--	---	--	--	--	--	--	--	--	--	--	--	----------------	--	--------------	--

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>		TOTAL RECEIVED		APPLY PAYMENT TO:		
	CHECK NUMBER				<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS		
INVOICE #		AMOUNT \$		INVOICE #		AMOUNT \$	
PREVIOUS CREDIT CARD NO.		CREDIT CARD NO.		EXP. DATE		AMEX VISA MC	

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Print Customer Name: SCOTTE COX

By: *Scott Cox*
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	42383
DO NOT WRITE IN THE AREA BELOW	
0039695776	
0002-8866-81 -2	

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

THIS AGREEMENT CONTINUES ON THE REVERSE SIDE

SERVICE AND SALES ACKNOWLEDGMENT PART 1-1366 (Rev. 05/07)

BILL OF LADING/MANIFEST		1. Shipper's US EPA ID No. (If Applicable) NC0101779726	Document No. 9.5776	2. Page 1 of 1
3. Shipper's Name and Mailing Address AVDEL CHERRY LLC 614 NC 200 HWY STANFIELD NC 28163				
4. Shipper's Phone (704) 888-7140				
5. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC		6. US EPA ID Number TXR000050930	A. Transporter's Phone 704 375-0098	
7. Transporter 2 Company Name		8. US EPA ID Number	B. Transporter's Phone	
9. Designated Facility Name and Site Address 000630 SAFETY-KLEEN SYSTEMS, INC. 130-A FRONTAGE ROAD LEXINGTON, SC 29073		10. US EPA ID Number SCD077995488	C. Facility's Phone 803 356-4061	
11. Shipping Name and Description			12. Containers	13. Total Quantity
			No.	Type
a. NON-REGULATED LIQUID			4	OF 1400
b. USED OIL AND ABSORBENT MIXTURE (NOT USDOT HAZARDOUS MATERIAL)			1	OF 300
c.				
d.				
15. Special Handling Instruction and Additional Information MFST R/T#110836079 0002-8866-81 EMERGENCY RESP 800-468-1760 (24 HR). A) NONE B) NONE SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY. SKDOT# A: 23136 B: 1003 C: D:				
16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.				
Printed/Typed Name		Signature required here if US DOT regulated		Month Day Year
16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.				
Printed/Typed Name SCOTTIE COX		Sign here if material is not DOT regulated		Month Day Year 08/13/09
17. Transporter 1 Acknowledgement of Receipt of Materials				
Printed/Typed Name MICHAEL KIBRNAW		Signature		Month Day Year 08/13/09
18. Transporter 2 Acknowledgement of Receipt of Materials				
Printed/Typed Name		Signature		Month Day Year
19. Discrepancy Indication Space				
20. Facility Owner or Operator: Certification of receipt of materials covered by this form except as noted in Item 19.				
Printed/Typed Name		Signature		Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

CERTIFICATE OF RECYCLING

Circle Environmental

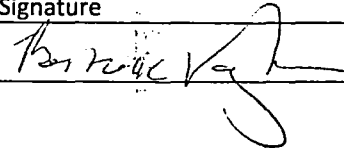
Sorbent Recyclers Inc.
 236 Storage Road
 Lancaster, SC 29720
 EPA ID # SCR000005140
 (800) 230-4143 Fax (803) 285-5653
 www.ce-nc.com

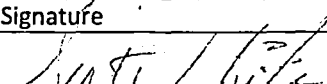
Tracking #: 2000425

Date: August 13, 2009

Generator:	<u>Textron - NC</u>
Address:	<u>614 NC Hwy, 200 South, Stantfield, NC</u>
Phone:	<u>704 - 888 - 7064</u>
Contact:	<u>Jeremy Efrid</u>

Material Description / Non-Hazardous	Quantity	Measurement
Oil Absorbent Recycling	<u>6</u>	
Shop Rags		
Used Oil (No more than 55 gal. on truck)		
Waste Energy Recycling		
Other		

Generator Certification		
We, the generator of this product, hereby certify that we have not mixed any hazardous waste in this product being picked up by the above company. We, the generator, also certify that this product does not contain any detectable levels of PCB's or Halogens. We, the generator, agree to hold Sorbent Recyclers Inc. DBA Circle Environmental harmless from all loss, costs, claims, damage, and liability which may arise as a result of generator providing Sorbent Recyclers Inc. with absorbents or other material containing hazardous materials.		
Printed Name	Signature	Date
<u>BENJAMIN VAUGHAN</u>		<u>8/13/09</u>

Transporter / Facility Acknowledgement of Receipt of Materials		
Sorbent Recyclers Inc. DBA Circle Environmental certifies that the waste described will be recycled in accordance with U.S. EPA and State Waste Management regulations.		
Printed Name	Signature	Date
<u>Scott White</u>		<u>8-13-09</u>

EMERGENCY CONTACT PHONE NUMBER IN CASE OF SPILL: 1-800-481-0125

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#
REFERENCE NBR 0039356006
SRVC WEEK: 09-29
SRVC DATE: 07/17/09 12:22
NC 28163
TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
52000 COMS MODEL 52 W/105 RECYCLE S/N 78699 CLEAN 15 SPENT 13 SERVICE TERM 12	1	99.0000	6.68	105.68
52000 COMS MODEL 52 W/105 RECYCLE S/N 88699 CLEAN 15 SPENT 13 SERVICE TERM 12	1	99.0000	6.68	105.68
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100001 FEE, FUEL SURCHARGE	1	10.8300	0.73	11.56
TOTAL SERVICE/PRODUCTS		216.8300	14.09	230.92

USEPA TRANSPORTER 1 TXR000050930 GENERATOR USEPA NCD010177926
USEPA TRANSPORTER 2 GENERATOR STATE
FORM CODE PP

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PGIII
RQ(D001)
D018, D039, D040 ERG#128
TOTAL CONT 2 TYPE DM 11L QTY 26 UNIT WT/VOL G SKDOT 801
CNT# 90620014582 QTY 13
CNT# 90620014583 QTY 13

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE
CHARLOTTE, NC 28205

USEPA ID NO NCD079060059	TOTAL CHARGE	230.92
STATE ID NO	WASTE MIN	0.00
	TOTAL DUE	230.92

UNPAID BALANCE THIS RECEIPT 230.92

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
0 - 220 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

X Scott G.
SIGNATURE NAME: SCOTT

www.safety-kleen.com // www.safety-kleen.com // www.safety-kleen.com

CERTIFICATE OF RECYCLING

Circle Environmental

Sorbent Recyclers Inc.
 236 Storage Road
 Lancaster, SC 29720
 EPA ID # SCR000005140
 (800) 230-4143 Fax (803) 285-5653
 www.ce-nc.com

Tracking #: 50006163

Date: July 2, 2009

Generator:	<u>Textron - NC</u>
Address:	<u>614 NC Hwy. 200 South</u>
Phone:	<u>704-888-7064</u>
Contact:	<u>Jeremy E. Fair</u>

Material Description / Non-Hazardous	Quantity	Measurement
Oil Absorbent Recycling	<u>2</u>	
Shop Rags		
Used Oil (No more than 55 gal. on truck)		
Waste Energy Recycling		
Other		

Generator Certification

We, the generator of this product, hereby certify that we have not mixed any hazardous waste in this product being picked up by the above company. We, the generator, also certify that this product does not contain any detectable levels of PCB's or Halogens. We, the generator, agree to hold Sorbent Recyclers Inc. DBA Circle Environmental harmless from all loss, costs, claims, damage, and liability which may arise as a result of generator providing Sorbent Recyclers Inc. with absorbents or other material containing hazardous materials.

Printed Name	Signature	Date
<u>Reaven V. [Signature]</u>	<u>Reaven V. [Signature]</u>	<u>7/2/09</u>

Transporter / Facility Acknowledgement of Receipt of Materials

Sorbent Recyclers Inc. DBA Circle Environmental certifies that the waste described will be recycled in accordance with U.S. EPA and State Waste Management regulations.

Printed Name	Signature	Date
<u>Brent Blacklock</u>	<u>Brent Blacklock [Signature]</u>	<u>7-2-09</u>

EMERGENCY CONTACT PHONE NUMBER IN CASE OF SPILL: 1-800-481-0125

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NBR
0038805837

SRVC WEEK: 09-17
SRVC DATE: 04/21/09 14:46
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
52000 COMS MODEL 52 W/105 RECYCLE S/N 88699 CLEAN 15 SPENT 14	1	99.0000	6.68	105.68
52000 COMS MODEL 52 W/105 RECYCLE S/N 78699 CLEAN 15 SPENT 14	1	99.0000	6.68	105.68
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100001 FEE, FUEL SURCHARGE	1	8.9000	0.60	9.50
TOTAL SERVICE/PRODUCTS		214.9000	13.96	228.86

USEPA TRANSPORTER 1 TXR000050930
USEPA TRANSPORTER 2
FORM CODE PP

GENERATOR USEPA NCD101779726
GENERATOR STATE

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PGIII
RQ(D001)

D018, D039, D040 ERG#128
TOTAL CONT. TYPE DM TTL QTY 28 UNIT WT/VOL G SKDOT 801
CNT# 90328015606 QTY 14
CNT# 90328015607 QTY 14

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE
CHARLOTTE, NC 28205

USEPA ID NO NCD079060059	TOTAL CHARG	228.86
STATE ID NO	WASTE MIN	0.00
	TOTAL DUE	228.86

UNPAID BALANCE THIS RECEIPT 228.86

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
0 - 220 lbs/month

Customer certifies that (i) the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

Robert E. Mullins

SIGNATURE NAME: ROBERT MULLINS

www.safety-kleen.com // Safety-Kleen. // www.safety-kleen.com // www.safety-kleen.com

K54474-R5732
LOCATION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

03/28/09 PAGE: 1
15:08:45

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 38805837

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000801

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LG LIQUID >= 10% TOC
D018
D037
D040

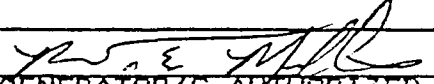
TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 250 CADMIUM
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 67 BENZENE

-----N O T E S-----

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2009

	Robert Mullins	4 / 21 / 09
GENERATOR'S AUTHORIZED SIGNATURE	NAME & TITLE (PRINTED OR TYPED)	DATE

SEQ#: 7436 LOC: 303101 TERR: 23 REF#: 38805837 SW: 0917

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFE

CERTIFICATE OF RECYCLING

Circle Environmental

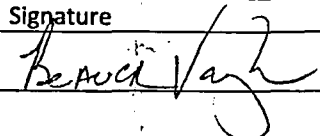
Sorbent Recyclers Inc.
 236 Storage Road
 Lancaster, SC 29720
 EPA ID # SCR000005140
 (800) 230-4143 Fax (803) 285-5653
 www.ce-nc.com

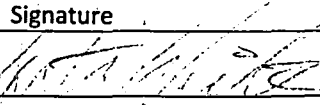
Tracking #: 4000019

Date: April 9, 2009

Generator:	<u>Texttron - NC</u>
Address:	<u>614 NC Hwy 200 South, Stanfield, NC</u>
Phone:	<u>704-888-7064</u>
Contact:	<u>Jerney Etrick</u>

Material Description / Non-Hazardous	Quantity	Measurement	
Oil Absorbent Recycling	<u>0</u>		
Shop Rags			
Used Oil (No more than 55 gal. on truck)			
Waste Energy Recycling			
Other			

Generator Certification		
We, the generator of this product, hereby certify that we have not mixed any hazardous waste in this product being picked up by the above company. We, the generator, also certify that this product does not contain any detectable levels of PCB's or Halogens. We, the generator, agree to hold Sorbent Recyclers Inc. DBA Circle Environmental harmless from all loss, costs, claims, damage, and liability which may arise as a result of generator providing Sorbent Recyclers Inc. with absorbents or other material containing hazardous materials.		
Printed Name	Signature	Date
<u>BEAVIER VAUGHN</u>		<u>4/9/09</u>

Transporter / Facility Acknowledgement of Receipt of Materials		
Sorbent Recyclers Inc. DBA Circle Environmental certifies that the waste described will be recycled in accordance with U.S. EPA and State Waste Management regulations.		
Printed Name	Signature	Date
<u>Scott White</u>		<u>4-9-09</u>

EMERGENCY CONTACT PHONE NUMBER IN CASE OF SPILL: 1-800-481-0125



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551
FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
104-375-0098 STEVE HETU			CREDIT CODE	PREVIOUS BALANCE	0005586713 BAL. OVER 60 DAYS
CUSTOMER SEGMENT	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C	
5-4214					
LOCATION			TAX EXEMPTION NO.		

GENERATOR

2886681

Ardell cherry
614 NC 200 Hwy
Stanfield NC 28163

BILL TO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
4/8/05	8655		704-888-7140					

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS/INITIAL)	CHANGE SCH. DATE (YR. WK)	INV. CODE	PROMO NO.	MSDS GIVEN	
									CLEAN	SPENT	# OF CONT.								SK DOT
1																			
2	822			7	622.00	41.99	663.99												
3																			
4																			
5																			
6																			
7																			
8																			
9																			
10																			
11																			
12																			



TOTAL-SERVICE/PRODUCTS				CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD <input type="checkbox"/>	POOR <input type="checkbox"/>	DECALS IN PLACE AND LEGIBLE	YES <input type="checkbox"/>	NO <input type="checkbox"/>	MACHINE PROPERLY GROUNDED	YES <input type="checkbox"/>	NO <input type="checkbox"/>
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	LAMP ASSEMBLY CONDITION				FUSIBLE LINK INSTALLED			LOCAL PHONE NO. STICKER AFFIXED TO MACHINE		
				EMERGENCY CLOSING OF LID UNOBSTRUCTED							SPENT SOLVENT MEETS ACCEPTANCE CRITERIA		

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)				12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:	
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA 993 PG 111 (D039)(ERG#128) 6.7 LBS/GAL.							801	0 TO 220 LBS./MONTH	
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA 993 PG 111 EQ (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)								INITIALS _____	
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE) UN3267 PG111(D006, D018, D027, D039, D040)(ERG153) 7.94/G							14950	220 LBS. TO 2,200 LBS./MONTH	
								INITIALS _____	
								GREATER THAN 2,200 LBS./MONTH	
								INITIALS _____	

DESIGNATED FACILITY NAME AND ADDRESS	SAFETY-KLEEN SYSTEMS, INC.	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
			STATE ID NO.

PAYMENT RECEIVED	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
	INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$
PREVIOUS CREDIT CARD NO.				

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

Print Customer Name: SCOTTIE COX

By: [Signature]
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	663.99
DO NOT WRITE IN THE AREA BELOW	
M005586713 008699	

CREDIT CARD NO.	AMEX VISA MC	EXP. DATE
CUSTOMER REFERENCE INFORMATION		

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

THIS AGREEMENT CONTINUES ON THE REVERSE SIDE

SERVICE AND SALES ACKNOWLEDGMENT
PART 01-1366 (Rev. 05/07)

BRANCH 303101 CSG 47

MOODY, SAMUEL

03/11/09 11:50 PAGE 1

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.00000 614 NC 200 HWY
COMS TAX: 0.00000
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NBR 0038445019
SRVC WEEK: 09-11
SRVC DATE: 03/11/09 11:45
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
66674 USED OIL SRV PREQUAL CREDIT	2300	0.0000	0.00	0.00
S/N 3225291 CLEAN O SPENT O				
HALOGEN / CHLOR-D-TECT TEST RESULT Pass: PPM<1000				
SERVICE TERM 6				
10044 EXTENDED SERVICE AREA FEE	0	0.0000	0.00	0.00
100007 FEE, FUEL SURCHARGE NON TAX	0	0.0000	0.00	0.00
TOTAL SERVICE/PRODUCTS		0.0000	0.00	0.00

RETURNS/CREDITS

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
10046 CREDIT, OIL PAY	2300.000	0.3500	0.00	805.00
TOTAL RETURNS/CREDITS		805.0000	0.00	805.00

USEPA TRANSPORTER 1 TXR000050930
USEPA TRANSPORTER 2
FORM CODE NR

GENERATOR USEPA NCU10179/26
GENERATOR STATE

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
USED OIL

(NOT USDOT HAZARDOUS MATERIAL)

TOTAL CONT 1 TYPE TT TTL QTY 2300 UNIT WT/VOL G SKD 1001
CNT# 80712020159 QTY 2300 PROF 3225291

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN / FIRST RECOVERY
12040 GOODRICH DRIVE
CHARLOTTE NC 28273

USEPA ID NO NCR000006775
STATE ID NO

TOTAL CHARGE -805.00
WASTE MIN 0.00
TOTAL DUE -805.00

CREDIT BALANCE THIS RECEIPT -805.00

Per SK BOG M420-001 the halogen detecting instrument has been zeroed and validated.

GENERATOR STATUS

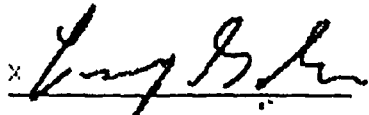
SQG/LQG - Other Non-Vehicle Fluids, Prequal Required, Halogen Test at Pick-Up

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred

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...in the charge of the... the... of... the...
...the waste/material... Customer agrees to pay the above charges...
...bound by the terms and conditions (1) set forth in (2) the...
...Terms and Conditions provided separately to Customer or (b) any...
...agreement signed by Customer and SK, and (2) incorporated here in by...
...reference. Unless otherwise indicated in the payment received section,
SK is authorized to charge Customer's account for this transaction.
Customer certifies that the individual signing this Service
Acknowledgement is duly authorized to sign and bind Customer. The
following provision is applicable to Safety-Kleen's parts cleaner and
paint gun cleaner services: Customer agrees that it will not introduce
any substance into the solvent or aqueous cleaning solution, including
without limitation any hazardous waste or hazardous waste constituent,
except to the extent such introduction is incidental to the normal use
of the machine. Customer further agrees that it will not clean
parts/paint guns that have been contaminated with or otherwise introduce
polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or
listed hazardous waste into the solvent or aqueous cleaning solution. IN
THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

Based on the current value of the Safety-Kleen Waste Oil Value Index, your fair market price for today's waste oil collection is \$0.35 per gallon of oil.

X 

SIGNATURE NAME: Larry gleason

BRANCH 303101 CSG 47 MOODY, SAMUEL 03/11/09 11:50 PAGE 2

X 

TRANSPORTER NAME: MOODY, SAMUEL

LAST PAGE

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5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	STEVE HERTZ		119		M005462158
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
				SVC. P/C	PROD. P/C
			LOCATION		TAX EXEMPTION NUMBER
			303101		

GENERATOR CUSTOMER

2882681

Ackell Cherry Texton
Attn: Harold Lucas
614 W C Hwy 200
St. Louis, MO 63165

BILL

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
2-17-09	431018		704-568-7100		01			

DEPT	SERVICE/PRODUCT	SURVEY NUMBER	UNIT PRICE	QUANTITY	CHARGE	SALES TAX	TOTAL CHARGE	CHLORINE TEST RESULTS		SK DOT NUMBER	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (YY WW)	PROMO NO.	RELEASE NO.
								HALOGEN TESTER PASS	FAIL							
1	6666	3225069	65	2800	1820.00	446	1820.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>	12700		12				
2	10971	21014		1200				<input type="checkbox"/>	<input type="checkbox"/>	12700		12				
3	10918	21014	65.00	2	130.00	446	130.00	<input type="checkbox"/>	<input type="checkbox"/>							
4	10001	21014	10.50	1	10.50	446	10.50	<input type="checkbox"/>	<input type="checkbox"/>							
5								<input type="checkbox"/>	<input type="checkbox"/>							
6								<input type="checkbox"/>	<input type="checkbox"/>							
7								<input type="checkbox"/>	<input type="checkbox"/>							
8								<input type="checkbox"/>	<input type="checkbox"/>							
9								<input type="checkbox"/>	<input type="checkbox"/>							

TOTAL-SERVICE/PRODUCTS				TANK CAPACITY 3000		TRANSPORTER DATE 2/17/09	
GENERATOR STATUS: CHECK ONLY ONE BOX BELOW				MANIFEST NO.	USEPA TRANSPORTER ID NO.		
GENERATOR: HAZARDOUS WASTE CLASSIFICATION *	VEHICLE FLUIDS ONLY	OTHER NON-VEHICLE FLUIDS	1 NO PREQUAL REQUIRED, NO HALOGEN TEST	XXXX	TXR000050930		
CESQG	<input type="checkbox"/> 1	<input type="checkbox"/> 3	2 NO PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.		
SQG/LQG	<input type="checkbox"/> 2	<input type="checkbox"/> 4	3 PREQUAL REQUIRED, NO HALOGEN TEST				
			4 PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP				
			* REFER TO REVERSE SIDE FOR DEFINITIONS				
PRINT NAME: [Signature]				SIGNATURE: [Signature]			
PRINT NAME: [Signature]				SIGNATURE: [Signature]			

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER
USED OIL (NOT USDOT HAZARDOUS MATERIAL)				850
USED OIL AND WATER MIXTURE (NOT USDOT HAZARDOUS MATERIAL)	21	2800	6	971 12700
USED ANTIFREEZE (NOT USEPA OR USDOT REGULATED)				1176



INTERMEDIATE FACILITY NAME AND ADDRESS: SAFETY-KLEEN SYSTEMS, INC.
USA EPA ID NO. NCD348461370
STATE ID NO. 28160

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	CREDIT CARD NO.	AMEX VISA MC	EXP. DATE
CUSTOMER REFERENCE INFORMATION			

MANIFEST CODE: 2013
SEQ #

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION.

Customer certifies 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 U.S. Environmental Protection Agency and the U.S. Department of Transportation.

ADDITIONAL TERMS AND CONDITIONS ON THE REVERSE SIDE OF THIS DOCUMENT ARE INCORPORATED HERewith MADE A PART HEREOF.

Print Name: Robert Mullins
Generator/Shipper Designated Representative Signature: [Signature]

TOTAL DUE \$1910.50
DO NOT WRITE IN THE AREA BELOW

M005462158
431018

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

PART NO. 1353 (05/07)

OIL RECOVERY SERVICE/ SALES ACKNOWLEDGMENT

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

REFERENCE NUMBER
0037687909

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#
SRVC WEEK: 08-46
SRVC DATE: 11/11/08 12:17
NC 28163
TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
52000 COMS MODEL 52 W/105 RECYCLE S/N 88699 CLEAN 15 SPENT 9	1	99.0000	6.68	105.68
SERVICE TERM 12				
52000 COMS MODEL 52 W/105 RECYCLE S/N 78699 CLEAN 15 SPENT 15	1	99.0000	6.68	105.68
SERVICE TERM 12				
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100001 FEE, FUEL SURCHARGE	1	15.1300	1.02	16.15
822 DEGREASER, HEAVY DUTY 55GL	1	311.0000	20.99	331.99
TOTAL SERVICE/PRODUCTS		532.1300	35.37	567.50

USEPA TRANSPORTER 1 TXR000050930 GENERATOR USEPA NCD101179/26
USEPA TRANSPORTER 2 GENERATOR STATE
FORM CODE PP

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PGIII
RQ(D001)
D018,D039,D040 ERG#128
TOTAL CONT 2 TYPE DM TTL QTY 24 UNIT WT/VOL G SK001 801
CNT# 81018017798 QTY 9
CNT# 81018017799 QTY 15

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE
CHARLOTTE, NC 28205

USEPA ID NO NCD079060059 TOTAL CHARGE 567.50
STATE ID NO WASTE MIN 0.00
TOTAL DUE 567.50

UNPAID BALANCE THIS RECEIPT 567.50

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
220 - 2200 lbs/month

Customer certifies that (i) the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

SIGNATURE NAME: LARRY

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Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 288681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NK 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NBR 0018384506
SRVC WEEK: 09-05
SRVC DATE: 01/29/09 07:57
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
88888 8/5480 LANDF NON USDDI HAZM S/N 40158050 CLEAN O SPENT O SERVICE TERM 24	4	81.0000	0.00	324.00
10044 EXTENDED SERVICE AREA FEE	0	0.0000	0.00	0.00
100007 FEE, FUEL SURCHARGE NON TAX	1	10.1800	0.00	10.18
TOTAL SERVICE/PRODUCTS		334.1800	0.00	334.18

USEPA TRANSPORTER 1 TXR0001- GENERATOR USEPA NCU101779726
USEPA TRANSPORTER 2 GENERATOR STATE
MANIFEST DOC # 84506 FORM CODE BL SK TRACKING # 110295043

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
NON-REGULATED LIQUID

TOTAL CONT 4	TYPE DM	TIL QTY 1000	UNIT WT/VOL P	SKDDI 25130
CNT# 90127000543	QTY 250	PROF 40158050		
CNT# 90127000544	QTY 250	PROF 40158050		
CNT# 90127000545	QTY 250	PROF 40158050		
CNT# 90127000546	QTY 250	PROF 40158050		

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

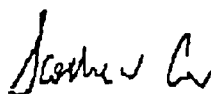
USEPA ID NO SCU077995488	TOTAL CHARGE	334.18
STATE ID NO	WASTE MIN	0.00
	TOTAL DUE	334.18

UNPAID BALANCE RECEIPT 334.18

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
220 - 2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (2) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)



SIGNATURE NAME: SCOTT

LAST PAGE

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Safety-Kleen

5400 Legacy Dr
Cluster III, Building 1
Plano, TX 75094
704

CUSTOMER# 2886681 AVDIT COUNTRY LLC
SERVICE TAX: 0.06750
COMS TAX: 0.06750
PRODUCT TAX: 0.06750
PHONE 704-888-7140
PURCHASE ORDER# V201479

REFERENCE NBR 0018222598
SRVC WEEK: 09 05
SRVC DATE: 01/26/09 10:35
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE	QTY	UNIT PRICE	TAX	TOTAL CHARGE
888 8/5480 LANDF NON USDO1 HAZ S/N 40158050 CLEAN O SPENT O SERVICE TERM 24	3	81.0000	0.00	243.00
8888 8/5480 LANDF NON USDO1 HAZ S/N 40139417 CLEAN O SPENT O SERVICE TERM 24	3	81.0000	0.00	243.00
10011 EXTENDED SERVICE FUEL FEE	0	0.0000	0.00	0.00
10011 FUEL SURCHARGE NON TAX	0	0.0000	0.00	0.00
TOTAL SERVICE/PRODUCTS		486.0000	0.0000	486.00

USEPA TRANSPORTER 1 TXR000000910
USEPA TRANSPORTER 2
MANIFEST DOC # 22598

GENERATOR USEPA NC0101
GENERATOR STATE
FORM CODE BL SK TRACKING # 110

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
USED OIL AND ABSORBENT MIXTURE
(NOT USDOT HAZARDOUS MATERIAL)

TOTAL CONT #	TYPE DM	EST QTY 0/5	UNIT WT
CNT# 90123011043	QTY 200	PROF 40139417	
CNT# 90123011044	QTY 200	PROF 40139417	
CNT# 90123011045	QTY 200	PROF 40139417	

NON-REGULATED LIQUIDS

TOTAL CONT #	TYPE DM	EST QTY 000	UNIT WT
CNT# 90123011043	QTY 200	PROF 40158050	
CNT# 90123011044	QTY 200	PROF 40158050	
CNT# 90123011045	QTY 200	PROF 40158050	

DESIGNATED FACILITY NAME/ADDRESS:

SAFETY KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC

USEPA ID NO SC0077995488
STATE ID NO

TOTAL CHARGE 486.00
WASTE MIN 0.00
TOTAL DUE 486.00


UNPAID BALANCE THIS RECEIPT 486.00

www.safety-kleen.com

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
220 - 2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)



SIGNATURE NAME: LARRY

BRANCH 303101 CSG 23

KIERNAN, MICHAEL

01/26/09 11:05 PAGE 2

LAST PAGE

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Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVDEL CHERMY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER# V201479

REFERENCE NBR
0038222599
SRVC WEEK: 09-05
SRVC DATE: 01/26/09 09:38
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
3250 TAX HANDLING N/C DRUM DROP	0	0.0000	0.00	0.00
57000 COMS MATH 52 W/105 RECYCLE	1	99.0000	.68	105.68
S/N 88699 CLEAN IS SPENT 13 SERVICE TERM 12				
52000 COMS MATH 52 W/105 RECYCLE	1			105.68
S/N 78699 CLEAN IS SPENT 13 SERVICE TERM 12				
22555 OIL SERVICE (02022555) CAUSE CODE V	1		0.00	
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100001 FEE, FUEL SURCHARGE	1	10.1800	0.69	10.87
TOTAL SERVICE/PRODUCTS		216.1800	14.05	230.23

USEPA HAZARDOUS WASTE TRANSPORTER 1
USEPA TRANSPORTER 2
FORM CODE PP

GENERATOR USEPA NO 0101770
GENERATOR STATE

HS DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASSIFICATION, WASTE COMBUSTIBLE LIQUID, N.O.S., (PETROLEUM NAPHTHA) NA1993 PGLII RQ(D001)
D018, D039, D040 ERG#128
TOTAL CONT 2 TYPE DM TIL QTY 26 UNIT W/VOL G
CNT# 90103016460 QTY 13
CNT# 90103016461 QTY 13

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE
CHARLOTTE, NC 28205

USEPA ID NO NCD0/9060059
STATE ID NO

TOTAL CHARGE 230.23
WASTE MIN 0.00
TOTAL DUE 230.23

UNPAID BALANCE THIS RECEIPT 230.23

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
220 - 2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)



SIGNATURE NAME: LARRY

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BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

84506

3. Shipper's Name and Mailing Address

NC D101779726
AVDEL CHERRY LLC
614 NC 200 HWY
STANFIELD NC 28163

4. Shipper's Phone (704) 888-7140

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

000630
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073
SCD077995488
803 356-4061

11. Shipping Name and Description

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

HM		No.	Type	Quantity	Unit Wt/Vol
a.	NON-REGULATED LIQUID	4	DM	1000	P
b.					
c.					
d.					

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760 (24 HR). A) NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 23136 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

SCOTTIE COX

1 29 09

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

MITCHELL RIBRNAW

01 29 09

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

Aue Humble
Aue Humble 23 09

SHIPPER

USE OR 16A 16B

TRANSPORTER

FACILITY

USE OR 16A 16B

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No. **84506**

2. Page 1 of

3. Shipper's Name and Mailing Address

NC D101779120
AVDEL CHERRY LLC
 614 NC 200 HWY

4. Shipper's Phone ()

STANFIELD NC 28163

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

000630
SAFETY-KLEEN SYSTEMS, INC.
 130-A FRONTAGE ROAD
 LEXINGTON, SC 29073

10. US EPA ID Number

SCD077995488

C. Facility's Phone

803 356-4061

11. Shipping Name and Description

12. Containers
 No. Type

13. Total Quantity

14. Unit Wt/Vol

SHIPPER
 a.
 b.
 c.
 d.

NON-REGULATED LIQUID

4 DM 1000 P

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760 (24 HR). A) NONE
 SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY

SKDOT# A: 23136 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

SCOTTIE COX

1 29 09

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

MICHAEL KIERNAW

01 29 09

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No

2. Page 1 of

22598

3. Shipper's Name and Mailing Address

NC D101779726
AVDEL CHERRY LLC
614 NC 200 HWY
STANFIELD NC 28163

4. Shipper's Phone

(704) 888-7140

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

000630
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

10. US EPA ID Number

SCD077995488

C. Facility's Phone

803 356-4061

11. Shipping Name and Description

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

HM

a. NON-REGULATED LIQUID

3

DM

600

P

b. USED OIL AND ABSORBENT MIXTURE (NOT USDOT HAZARDOUS MATERIAL)

3

DM

675

P

15. Special Handling Instruction and Additional Information

MFST R/T#110285583 0002-8866-81
EMERGENCY RESP 800-468-1760 (24 HR). A) NONE B) NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 23136 B: 1003 C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

SHIPPER

USE OR 16A 16B

FACILITY

USE OR 16A 16B

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No. **22598**

2. Page 1 of

3. Shipper's Name and Mailing Address

AVDEL CHERRY LLC
614 NC 200 HWY

4. Shipper's Phone ()

(704) 488-7140

STANFIELD

NC 28163

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

000630
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

10. US EPA ID Number

SCD077995488

C. Facility's Phone

803 356-4061

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a.	HM	Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
			No.	Type		
		NON-REGULATED LIQUID	3	DM	600	P
		USED OIL AND ABSORBENT MIXTURE (NOT USDOT HAZARDOUS MATERIAL)	3	DM	675	P

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760 (24 HR). A) NONE B) NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 23136 B: 1003 C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

**IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)**

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NBR 0037887473
SRVC WEEK: 08-50
SRVC DATE: 12/11/08 10:
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
50000 COMS MDL 50 W/105 RECYCLED S/N 68699 CLEAN 5 SPENT 6	1	77.0000	5.20	82.20
SERVICE TERM 52				
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100001 FEE, FUEL SURCHARGE	1	12.1500	0.82	12.97
TOTAL SERVICE/PRODUCTS		97.1500	6.02	103.17

USEPA TRANSPORTER 1 1XRU00050930
USEPA TRANSPORTER 2
FORM CODE PP

GENERATOR USEPA NCD101779726
GENERATOR STATE

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NAL193 PGIII
(D001, D018, D039, D040 (ERG#128))
TOTAL CONT 1 TYPE DF TIL QTY 6 UNIT W/VOL G SKDOT 704
CNT# 81115018254 QTY 6

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE
CHARLOTTE, NC 28205

USEPA ID NO NCD079060059,	TOTAL CHARGE	103.17
STATE ID NO	WASTE MIN	0.00
	TOTAL DUE	103.17

UNPAID BALANCE THIS RECEIPT 103.17

- Machine clean and good condition? Yes
- Decals in place and legible? Yes
- Fusible link installed? Yes
- Emergency closing of lid unobstructed? Yes
- Machine properly grounded? Yes
- Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
0 - 220 lbs/month

Customer certifies that (1) the above materials are properly classified, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (2) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions printed separately to Customer or (b) any SK agreement signed by Customer and (2) incorporated herein by reference. Unless otherwise indicated in the payment receipt, the SK is authorized to charge back to you for the above charges. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety Kleen's parts cleaner and paint gun cleaner services. Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1 800 468 1500 (24 hours)

SIGNATURE (NAME) (PRINT)

K54474-R5732
LOCATION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

11/15/08 PAGE: 1
16:01:24

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 37887473

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000704

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 Lq LIQUID >= 10% TOC
D018
D039
D040

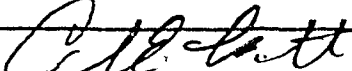
TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM
P-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM
M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 240 2,4,6-TRICHLOROPHENOL
- 248 BARIUM
- 250 CADMIUM
- 251 CHROMIUM (TOTAL)
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 260 SILVER
- 67 BENZENE
- 91 CHLOROFORM

-----N O T E S-----

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2008


GENERATOR'S AUTHORIZED SIGNATURE

Chris Little
NAME & TITLE
(PRINTED OR TYPED)

12, 11, 2008
DATE

SEQ#: 8233 LOC: 303101

TERR: 23 REF#: 37887473 SW: 0850

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TRANSFER



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019 CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
104-375-0098	STEVE HETU		08		M005230781
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
				SVC. P/C	PROD. P/C
			LOCATION		TAX EXEMPTION NUMBER
			303101		

GENERATOR CUSTOMER

2 8 8 6 6 8 1

*Avdel Cherry
614 NC 200 Hwy
Stanfield NC*

BILL TO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
10/5/8	008389		704 888 7140		OR			

DEPT	SERVICE/PRODUCT	SURVEY NUMBER	UNIT PRICE	QUANTITY	CHARGE	SALES TAX	TOTAL CHARGE	CHLORINE TEST RESULTS		SK DOT NUMBER	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH DATE (YY WW)	PROMO NO.	RELEASE NO.
								HALOGEN TESTER PASS	FAIL							
1	66674			4000				<input type="checkbox"/>	<input type="checkbox"/>	850	06					
2								<input type="checkbox"/>	<input type="checkbox"/>							
3	10046		1.50				240.00	<input type="checkbox"/>	<input type="checkbox"/>							
4								<input type="checkbox"/>	<input type="checkbox"/>							
5								<input type="checkbox"/>	<input type="checkbox"/>							
6								<input type="checkbox"/>	<input type="checkbox"/>							
7								<input type="checkbox"/>	<input type="checkbox"/>							
8								<input type="checkbox"/>	<input type="checkbox"/>							
9								<input type="checkbox"/>	<input type="checkbox"/>							

TOTAL-SERVICE/PRODUCTS	TANK CAPACITY	TRANSPORTER	DATE
2000.00		Safety-Kleen	11/3/8

GENERATOR STATUS: CHECK ONLY ONE BOX BELOW				MANIFEST NO.	USEPA TRANSPORTER ID NO.	PRINT NAME	SIGNATURE
GENERATOR: HAZARDOUS WASTE CLASSIFICATION *	VEHICLE FLUIDS ONLY	OTHER NON-VEHICLE FLUIDS	1 NO PREQUAL REQUIRED, NO HALOGEN TEST 2 NO PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP 3 PREQUAL REQUIRED, NO HALOGEN TEST 4 PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP * REFER TO REVERSE SIDE FOR DEFINITIONS		TXR000050930	Safety-Kleen	Sam Moorey
CESQG	<input type="checkbox"/> 1	<input type="checkbox"/> 3		GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	Safety-Kleen	Sam Moorey
SQG/LQG	<input type="checkbox"/> 2	<input type="checkbox"/> 4					

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER
USED OIL (NOT USDOT HAZARDOUS MATERIAL)	801 TT	4000	6	850
USED OIL AND WATER MIXTURE (NOT USDOT HAZARDOUS MATERIAL)				927
USED ANTIFREEZE (NOT USEPA OR USDOT REGULATED)				1176



INTERMEDIATE FACILITY NAME AND ADDRESS	USA EPA ID NO.
12046 Goodrich Charlotte NC 28273	UCR000006775
	STATE ID NO.

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
	INVOICE #	AMOUNT \$	INVOICE #
			AMOUNT \$

MANIFEST CODE	SEQ #
	7 D

CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION.

Customer certifies 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 U.S. Environmental Protection Agency and the U.S. Department of Transportation.

ADDITIONAL TERMS AND CONDITIONS ON THE REVERSE SIDE OF THIS DOCUMENT ARE INCORPORATED HERewith MADE A PART HEREOF.

Print Name: *SCOTTIE W. COX*

Generator/Shipper Designated Representative Signature: *[Signature]*

TOTAL DUE	DO NOT WRITE IN THE AREA BELOW
2000.00	
	M005230781
	008389

PREVIOUS CREDIT CARD NO.	CREDIT CARD NO.	AMEX	VISA	MC	EXP. DATE
CUSTOMER REFERENCE					

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

VISA
MasterCard
AMERICAN EXPRESS

OIL RECOVERY SERVICE/ SALES ACKNOWLEDGMENT

PART NO. 1353 (05/07)

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 37687909

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000801

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LQ LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 240 2, 4, 6-TRICHLOROPHENOL
- 248 BARIUM
- 250 CADMIUM
- 251 CHROMIUM (TOTAL)
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 260 SILVER
- 67 BENZENE
- 91 CHLOROFORM

-----NOTES-----

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2008

Larry Gleason
GENERATOR'S AUTHORIZED SIGNATURE

LARRY GLEASON
NAME & TITLE (PRINTED OR TYPED)

11 / 17 / 08
DATE



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	STEVE HETU		08		M005034260
CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS			
CUSTOMER SEGMENT	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C	
LOCATION			TAX EXEMPTION NUMBER		
303101					

GENERATOR CUSTOMER

2	8	1	6	8	1						
---	---	---	---	---	---	--	--	--	--	--	--

Andell Cherry
64 N.C. Hwy 200
Stanfield, N.C. 28163

BILL TO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX							
2-2-08	431018		704-888-7100		OR										
DEPT	SERVICE/PRODUCT	SURVEY NUMBER	UNIT PRICE	QUANTITY	CHARGE	SALES TAX	TOTAL CHARGE	CHLORINE TEST RESULTS	SK DOT NUMBER	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (YY WW)	PROMO NO.	RELEASE NO.
1	464666	3225069	M/L	2200	M/L	M/L	M/L	HALOGEN TESTER PASS <input checked="" type="checkbox"/> FAIL <input type="checkbox"/> CHLOR-D-TEST RESULTS (PPM) <input type="checkbox"/> TESTERS INITIALS <i>mm</i>	12700						
2	10971	300168	.65	2200	1470.00	M/L	1470.00		12700						
3	10918	Truck	65.00	1	65.00	M/L	65.00								
4	10001	Fuel Surcharge	19.43	1	19.43	M/L	19.43								

TOTAL-SERVICE/PRODUCTS					TANK CAPACITY	TRANSPORTER	DATE
					\$1514.43	2800	8/2/08
GENERATOR STATUS: CHECK ONLY ONE BOX BELOW				MANIFEST NO.	USEPA TRANSPORTER ID NO.	<i>Ray Anderson</i>	X <i>Ray Anderson</i>
GENERATOR: HAZARDOUS WASTE CLASSIFICATION *	VEHICLE FLUIDS ONLY	OTHER NON-VEHICLE FLUIDS	1 NO PREQUAL REQUIRED, NO HALOGEN TEST	XXXXXX	TXR000050930	PRINT NAME	SIGNATURE
CESQG	<input type="checkbox"/> 1	<input type="checkbox"/> 3	2 NO PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP				
SOQ/LQG	<input type="checkbox"/> 2	<input type="checkbox"/> 4	3 PREQUAL REQUIRED, NO HALOGEN TEST	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	<i>Ray Anderson</i>	X <i>Ray Anderson</i>
			4 PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP			PRINT NAME	SIGNATURE
			* REFER TO REVERSE SIDE FOR DEFINITIONS				

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER
USED OIL (NOT USDOT HAZARDOUS MATERIAL)				850
USED OIL AND WATER MIXTURE (NOT USDOT HAZARDOUS MATERIAL)		2200		927
USED ANTIFREEZE (NOT USEPA OR USDOT REGULATED)				12700
				4376



INTERMEDIATE FACILITY NAME AND ADDRESS	SAFETY-KLEEN SYSTEMS, INC.	USA EPA ID NO.	N/CN 000135970
<i>Coastal Carolina Community College 116 N. State St 177 Havel, N.C. 28574</i>		STATE ID NO.	

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION.	TOTAL DUE	\$1514.43
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS		Customer certifies 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 U.S. Environmental Protection Agency and the U.S. Department of Transportation.	DO NOT WRITE IN THE AREA BELOW
PREVIOUS CREDIT CARD NO.	INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$	M005034260	
					431018	
CREDIT CARD NO.	AMEX	VISA	MC	EXP. DATE		
CUSTOMER REFERENCE INFORMATION						

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

Print Name: *Calvin Knotts*
Generator/Shipper Designated Representative Signature: *Calvin Knotts*
SEE REVERSE SIDE FOR IMPORTANT INFORMATION

OIL RECOVERY SERVICE/ SALES ACKNOWLEDGMENT

PART NO. 1353 05/07

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

ACUMENT
614 NC HWY 200
STANFORD NC

Generator's Phone:

6. Transporter 1 Company Name

U.S. EPA ID Number

METALWORKING LABORATORIES

27-000046950

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

U.S. EPA ID Number

METALWORKING LABORATORIES

Facility's Phone:

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1.

100% OIL NON HAZARDOUS

1

TW

5500

GA

2.

3.

4.

13. Special Handling Instructions and Additional Information

NON DOT REGULATIONS

14. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Generator's/Officer's Printed/Typed Name

Signature

Month Day Year

Thomas Walker

Thomas Walker

Month Day Year

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

ERIC SNIDER

ERIC SNIDER

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

EXCAVATED

SOIL SENT FOR DISPOSAL

BILL OF LADING/MANIFEST		1. Shipper's US EPA ID No. (If Applicable) NCB101779726	Document No. 64250	2. Page 1 of 1
3. Shipper's Name and Mailing Address AVDEL USA LLC PO BOX 558 WINDONA WV 26055-9701				
4. Shipper's Phone (704) 888-7140		6. US EPA ID Number	A. Transporter's Phone	
5. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC.		8. US EPA ID Number TXR00001350	B. Transporter's Phone 870-255-2000	
9. Designated Facility Name and Site Address 7403 SAFETY-KLEEN SYSTEMS, INC. 130-A FRONTAGE ROAD LEXINGTON, SC 29073		10. US EPA ID Number SCD077995488	C. Facility's Phone 803-356-4061	
11. Shipping Name and Description			12. Containers	13. Total Quantity
HM			No.	Type
a.	USED OIL AND ABSORBENT MIXTURE (NOT USDOT HAZARDOUS MATERIAL)		6	DM
b.	NON-REGULATED LIQUID		2	DM
c.				
d.				
15. Special Handling Instruction and Additional Information SK SHIP# 200909071 2886681 24 HR EMERGENCY #1-800-468-1760 (SAFETY-KLEEN - 94138 A) NONE B) NONE SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY DOT/PRFL A. 401310/40139417 B. 400130/40158050 C. D.				
16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.				
Printed/Typed Name		Signature required here if US DOT regulated		Month Day Year
16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.				
Printed/Typed Name		Sign here if material is not DOT regulated		Month Day Year
ROBERT E. MILLERS		[Signature]		5 19 10
17. Transporter 1 Acknowledgement of Receipt of Materials				
Printed/Typed Name		Signature		Month Day Year
CLINT McDONALD		[Signature]		5 19 10
18. Transporter 2 Acknowledgement of Receipt of Materials				
Printed/Typed Name		Signature		Month Day Year
19. Discrepancy Indication Space				
20. Facility Owner or Operator: Certification of receipt of materials covered by this form except as noted in Item 19.				
Printed/Typed Name		Signature		Month Day Year

SHIPPER

USE OR 16B

USE OR 16B

TRAMP OR T

IN EVENT OF EMERGENCY CALL 1-800-468-1760 (24 hours)

Safety-Kleen Systems, Inc.

5360 Legacy Drive.
Building 2, Suite 100
Plano, Texas 75024
800-669-5740
704-375-0098

REFERENCE NBR.
50497267
SRVC WEEK: 2010-21
SRVC DATE: 05/19/10 16:32

CUSTOMER# 2886681 AVDEL USA LLC
614 NC 200 HWY
STANFIELD NC 28163-6749
PHONE 704-888-7140

PURCHASE ORDER#

TAX EXEMPTION NBR

PRODUCT/SERVICES

Table with columns: SERVICE/PRODUCT, QTY, UNIT PRICE, TAX, TOTAL CHARGE. Includes rows for DEGREASER, HEAVY DUTY 55G SERVICE TERM 8 and summary rows for TOTAL SERVICE/PRODUCTS, TOTAL CHARGE CREDITS, and TOTAL DUE.

UNPAID BALANCE THIS RECEIPT 670.21

GENERATOR STATUS
0 - 220 lbs/month

intended to satisfy the requirements of 40 CFR 262.20(c). IN THE EVENT OF AN EMERGENCY CALL 1-800-463-1760 (24 hours)

Signature of Robert E. Mullins

CUSTOMER / GENERATOR :robert mullins

LAST PAGE

Safety-Kleen Systems, Inc.

5360 Legacy Drive.
Building 2, Suite 100
Plano, Texas 75024
800-669-5740
704-375-0098

REFERENCE NBR
50964250
SRVC WEEK: 2010-2
SRVC DATE: 05/19/10 16:32

CUSTOMER# 2886681 AVDEL USA LLC
614 NC 200 HWY
STANFIELD NC 28163-6749
PHONE 704-888-7140

PURCHASE ORDER#

PRODUCT/SERVICES

Table with columns: SERVICE/PRODUCT, QTY, UNIT PRICE, TAX, TOTAL CHARGE. Includes rows for LANDF NON USDOT HAZMAT, N SERVICE TERM 52 and summary rows for TOTAL SERVICE/PRODUCTS, TOTAL CHARGE CREDITS, and TOTAL DUE.

UNPAID BALANCE THIS RECEIPT 648.00

GENERATOR STATUS
0 - 220 lbs/month

intended to satisfy the requirements of 40 CFR 262.20(c). IN THE EVENT OF AN EMERGENCY CALL 1-800-463-1760 (24 hours)

Signature of Robert E. Mullins

CUSTOMER / GENERATOR :robert mullins

Watermark text: www.safety-kleen.com // www.safety-kleen.com

BRANCH 7055 CSG 23
CUSTOMER/GENERATOR: 2886681 AVDEL USA LLC
REGULATOR US EPA ID, REGULATORY ID, GENERATOR STATE
SRVC WEEK: 2010-21
SRVC DATE: 05/19/10
SRV WEEK: 2010-2
SRVC DATE: 05/19/10
SRV WEEK: 2010-2
SRVC DATE: 05/19/10
SRV WEEK: 2010-2
SRVC DATE: 05/19/10

Signature of Robert E. Mullins
CUSTOMER / GENERATOR :robert mullins

LAST PAGE

LOADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of

Shipper's Name and Mailing Address

4. Shipper's Phone ()

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

SAFETY-CLEAN SYSTEMS
100-A FRONTAGE ROAD
LEXINGTON, NC 28074

NC0001789348S

804-586-4061

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a.	HM	Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
			No.	Type		
		NON-REGULATED LIQUID	4	im	1000	
b.						
c.						
d.						

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760 (24 HRS) AT NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY

SKDOT# A: 23136 B: () ()

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

SCOTTE COV

[Signature]

1 27 07

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

MICHAEL KIERMAN

[Signature]

01 27 07

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

SHIPPER

USE

16A

OR

16B

TRANSPORTER

FACILITY

USE

16A

OR

16B

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 G14 NC 200 HWY
COMS TAX: 0.06750
PHODUCT TAX: 0.06750 STANFIELD
PHONE 704-838-7140
PURCHASE ORDER#

REFERENCE NBR 003/027004
SRVC WEEK: 08-32
SRVC DATE: 08/08/08 10:00
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
88888 875480 LANDF NON USDD1 HAZM	1	81.0000	0.00	81.00
S/N 40158050 CLEAN 0 SPENT 0				
SERVICE TERM 24				
88888 875480 LANDF NON USDD1 HAZM	0	0.0000	0.00	0.00
S/N 40139417 CLEAN 0.0 SPENT 0				
CAUSE CODE V				
10044 EXTENDED SERVICE AREA FEE	0	0.0000	0.00	0.00
10000/ FEE, FUEL SURCHARGE NON TAX	1	19.7600	0.00	19.76
88888 875460 LANDF NON USDD1 HAZM	1	101.0000	0.00	101.00
S/N 3225276 CLEAN 0 SPENT 0				
SERVICE TERM 52				
TOTAL SERVICE/PRODUCTS		201.7600	0.00	201.76

USEPA TRANSPORTER 1 1XK000050910 GENERATOR USEPA NCD101/19726
USEPA TRANSPORTER 2 GENERATOR STATE
MANIFEST DOC # 2/004 FORM CODE BL SK TRACKING # 109799691

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
NON-REGULATED LIQUID
TOTAL CONT 1 TYPE UNL QTY 400 UNL WT/VOL P SKDOT 23136
CONT# 80806008630 QTY 400 PROF 40158050
NON REGULATED SOLID
TOTAL CONT 1 TYPE UNL QTY 100 UNL WT/VOL P SKDOT 25383
CONT# 80729008301 QTY 100 PROF 3225276

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

USEPA ID NO SCD07995488	TOTAL CHARGE	201.76
STATE ID NO	WASTE MIN	0.00
	TOTAL DUE	201.76

UNPAID BALANCE THIS RECEIPT 201.76

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
220 - 2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

EPA ID Number	A. Transporter's Phone
EPA ID Number	B. Transporter's Phone
EPA ID Number	C. Facility's Phone

12. Containers	
No.	Type
	DF
	DF

FORM # 109799691 0002 4666
NONE B) NONE
SUBSEQUENT CARRIERS AND ETC
1136 B: 1003 01250323

The above-named materials are properly classified, described, packaged, marked and labeled according to the applicable regulations of the Department of Transportation.

Signature: *Kevin Mullis*
Signature: *...*

Signature: *...*
Signature: *...*
Signature: *...*

pt as noted in Item 19.

www.safety-kleen.com

MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of

Mailing Address

STANFIELD

NC 28163

4. Shipper's Phone (Area & Number)

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

SAFETY-KLEEN SYSTEMS, INC
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

SCD077995488

803 250-4001

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a.	HM	Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
			No.	Type		
		NON-REGULATED LIQUID	201	DF	0400	
		USED OIL AND ADSORBENT MIXTURE (NOT US DOT HAZARDOUS MATERIAL)				
		non-regulated solid	201	DF	0100	

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760 (24 HR). A) NONE B) NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY

SKDOT# A: 23136 B: 1003 C: 25387 D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

TRANSPORTER # 1

FORM NO. 90291 (11/96)

Document No. 28163 NC EPA ID Number 0050030

Safety-Kleen

5400 Legacy Dr. Cluster II, Building 3 Plano, Texas 75024 704-375-0098

CUSTOMER# 2886681 AVOEL CHERRY LLC SERVICE TAX: 0.06750 614 NC 200 HWY COMS TAX: 0.06750 PRODUCT TAX: 0.06750 STANFIELD PHONE 704-888-7140 PURCHASE ORDER#

REFERENCE NBR: 0037027006 SRVC WEEK: 08-32 SRVC DATE: 08/08/08 11:47 NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

Table with columns: SERVICE/PRODUCT, QTY, UNIT PRICE, TAX, TOTAL CHARGE. Includes items like TAX HANDLING N/C DRUM DROP, FLUORESCENT BULB PROGRAM, EXTENDED SERVICE AREA FEE, etc.

USEPA TRANSPORTER 1 IXR000050930 GENERATOR USEPA NCD101779726 USEPA TRANSPORTER 2 GENERATOR STATE MANIFEST DOC # 27006 FORM CODE BL SK TRACKING # 109775414

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID) DRAINED USED OIL FILTERS Universal Waste Comps

Table with columns: TOTAL CONT, TYPE CF, FIL QTY 200, UN11 WT/VOL P, SKDOT. Lists container counts for oil filters.

DESIGNATED FACILITY NAME/ADDRESS: CLEANLITES RECYCLING INC 100 FINE RD SPARTANBURG SC 29303

Summary table with columns: USEPA ID NO, STATE ID NO, TOTAL CHARGE, WASTE MIN, TOTAL DUE. Shows total due of 149.76.

UNPAID BALANCE THIS RECEIPT 149.76

- Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 220 - 2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material.

Handwritten numbers: 00076426, 7005488, 27313

Handwritten initials: mp, ter

T R/T#10977 NONE UBSEQUENT C.

5383 B:

Regulation checkboxes: regulated, not regulated.

Handwritten signature and initials.

cept as noted in Item 19.

Handwritten signature: Larry Gleason

SIGNATURE NAME: Larry gleason

Vertical text on the right edge: www.safety-kleen.com

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of

3. Shipper's Name and Mailing Address

AVDEL CHERRY LLC
614 NC 200 HWY

STANFIELD

NC 28163

4. Shipper's Phone (704) 888-7140

5. Transporter 1 Company Name

6.

US EPA ID Number

A. Transporter's Phone

~~SAFETY KLEEN SYSTEMS, INC~~

TXR000050930

704 375 0098

7. Transporter 2 Company Name

8.

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

000630

10.

US EPA ID Number

C. Facility's Phone

~~SAFETY KLEEN SYSTEMS, INC.~~

Clean lites
130 A FRONTAGE ROAD 100 Fine Rd
EXINGTON, NC 29073
Spartanburg, SC 29303

SCR000764269

864-503-9908

~~EXINGTON, SC 29073~~

SCD077995488

~~803-556-1061~~

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

HM

No.

Type

a. ~~NON REGULATED SOLID~~

~~DM~~

b. Universal waste Lamp
NOT US DOT Regulator

105 CF 0200

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760 (24 HR). A) NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

1120 SKDOT# A: 25383 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

CLEAN FORM
MANIFEST 1
SALES SERVICE 1
CUS

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NBR 0037027005
SRVC WEEK: 08-32
SRVC DATE: 08/08/08 11:4
NC 28163

TAX EXEMPTION NBR:

IFY THAT THIS SH
ND DISPOSAL RESI

OTIFICATION
E# 01/001 SK PF

NY:
X TDC

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
52000 COMS MODEL 52 W/105 RECYCLE S/N 88699 CLEAN 15 SPENT 10 SERVICE TERM 12	1	99.0000	6.68	105.68
52000 COMS MODEL 52 W/105 RECYCLE S/N 78699 CLEAN 15 SPENT 10 SERVICE TERM 12	1	99.0000	6.68	105.68
10044 EXTENDED SERVICE AREA FEE	0	0.0000	0.00	0.00
100001 FEE, FUEL SURCHARGE	0	0.0000	0.00	0.00
TOTAL SERVICE/PRODUCTS		198.0000	13.36	211.36

USEPA TRANSPORTER 1 1XK000050930
USEPA TRANSPORTER 2
FORM CODE DP

GENERATOR USEPA NCU101779/26
GENERATOR STATE

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) N1193 PGIII
RQ(D001)
D018, D039, D040 ERG#128
TOTAL CONT 2 TYPE DM TTL QTY 20 UNIT WT/VOL G SKDOT 801
CNT# 80719018406 QTY 10
CNT# 80719018407 QTY 10

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE
CHARLOTTE, NC 28205

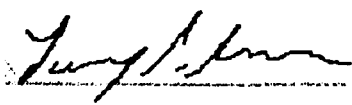
USEPA ID NO NCU079060059	TOTAL CHARGE	211.36
STATE ID NO	WASTE MIN	0.00
	TOTAL DUE	211.36

UNPAID BALANCE THIS RECEIPT 211.36

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible Link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
220 - 2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)



SIGNATURE NAME: Larry gleason

FILE TYPED)

TERR: 23 REF

ACILITY BC

www.safety-kleen.com

K54474-R5732
LOCATION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

07/19/08 PAGE: 1
07:36:13

GENERATOR NAME: AYDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 37027005

CUST#: 0002-9866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000301

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LG LIQUID D= 10% TOC
D019
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 240 2, 4, 6-TRICHLOROPHENOL
- 248 BARIUM
- 250 CADMIUM
- 251 CHROMIUM (TOTAL)
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 260 SILVER
- 67 BENZENE
- 91 CHLOROFORM

----- N O T E S -----

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2008

<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>
GENERATOR'S AUTHORIZED SIGNATURE	NAME & TITLE (PRINTED OR TYPED)	DATE

SEQ#: 7797 LOC: 303101 TERM: 23 REF#: 37027005 SW: 0836

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NBR 0036988012
SRVC WEEK: 08-29
SRVC DATE: 07/18/08 11:40
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
88888 875480 LANDF NON USDOT HAZM S/N 40139417 CLEAN 0 SPENT 0 SERVICE TERM 24	3	81.0000	0.00	243.00
88888 875480 LANDF NON USDOT HAZM S/N 40158050 CLEAN 0 SPENT 0 SERVICE TERM 24	1	81.0000	0.00	81.00
88888 875510 METAL REC ELECTRONIC S/N 40279413 CLEAN 0 SPENT 0 CAUSE CODE V	0	0.0000	0.00	0.00
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100007 FEE, FUEL SURCHARGE NON TAX	1	19.4300	0.00	19.43
3230 TAX HANDLING N/C DRUM DROP	1	0.0000	0.00	0.00
3207 BOX FLOR BULBS 8"	1	99.8400	0.00	99.84
822 DEGREASER, HEAVY DUTY 55GL	1	311.0000	20.99	331.99
22444 FLUORESCENT BULB PROGRAM SERVICE TERM 24	1	0.0000	0.00	0.00
TOTAL SERVICE/PRODUCTS		762.2700	20.99	783.26

USEPA TRANSPORTER 1 TXR000050930
USEPA TRANSPORTER 2
MANIFEST DOC # 88012

GENERATOR USEPA NCD101779726
GENERATOR STATE
FORM CODE BL SK TRACKING # 109731362

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
USED OIL AND ABSORBENT MIXTURE
(NOT USDOT HAZARDOUS MATERIAL)

INITIAL CONT #	TYPE DF	TTL QTY	UNIT WT/VOL P	SKDOT
CNT# 80714007650	QTY 250	PROF 40139417		1003
CNT# 80714007651	QTY 250	PROF 40139417		
CNT# 80714007652	QTY 250	PROF 40139417		

NON-REGULATED LIQUID	TYPE DF	TTL QTY	UNIT WT/VOL P	SKDOT
TOTAL CONT 1	QTY 400	PROF 40158050		23136
CNT# 80714007655	QTY 400			

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON,

SC 29073

USEPA ID NO SCD077995488
STATE ID NO

TOTAL CHARGE	783.26
WASTE MIN	0.00
TOTAL DUE	783.26

UNPAID BALANCE THIS RECEIPT

88012
cant-630-2312652 875480-N-
630-20091495 875480-N-
50516-200180575-N-
875515
greaser
Friday

City, Zip Code	Contact Person	Request Service Date	Work Order Initiated By	Date Work Order Entered	Pricing Exception	Service - Product	Service Interval
Plano, TX 75024	Larry	ASAP	Dave Monroe	7/14/08	Received	88888	88888

www.safety-kleen.com // www.safety-kleen.com

DEL CHERRY LLC
802-8866-81
80714007651
80714007652
80714007655

DEL CHERRY LLC
802-8866-81
80714007651
80714007652
80714007655

Instructions / Notes
representative

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

NC D101778725

88012

3. Shipper's Name and Mailing Address
AVDEL CHERRY LLC
614 NC 200 HWY

STANFIELD

NC 28163

4. Shipper's Phone (704) 888-7140

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

~~SAFETY KLEEN SYSTEMS, INC~~

~~TXR000050930~~

~~704 375-0098~~

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

000630
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

SCD077995488

803 356-4061

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit WVol

a.	HM	Description	12. Containers		13. Total Quantity	14. Unit WVol
			No.	Type		
		NON-REGULATED LIQUID	001	DF	0400	P
		USED OIL AND ABSORBENT MIXTURE (NOT USDOT HAZARDOUS MATERIAL)	003	DF	0750	P

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760 (24 HR). A) NONE B) NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 23136 B: 1003 C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

SCOTTIE COX

Signature

07/18/08

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Kevin L Mullis

Signature

07/18/08

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

SHIPPER

USE OR 5B

USE OR 16A 16B

FACILITY



5400 Legacy Drive, Cluster II, B3
 Plano, Texas 75024
 800-669-5740
 www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

BRANCH-TSU

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	STEVE HETU		08		1004974521
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
			SVC. P/C	PROD. P/C	
			LOCATION	TAX EXEMPTION NO.	
			303101		

GENERATOR
CUSTOMER

2 8 8 6 6 8 1
 Model Cherry LLC
 614 N.E. 200
 Stanfield N.C.

B I L L

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
7-18-07	003456		7698887140		DM			

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	MG	
									CLEAN	SPENT	# OF CONT.								
1																			
2	2222	40279113		1	930.00	-	930.00												
3																			
4	23444			1	nk	-	nk												
5																			
6	23207			1	nk	-	nk												
7																			
8																			
9																			
10																			
11																			
12																			

TOTAL-SERVICE/PRODUCTS	930.00	CHECK APPROPRIATE BOXES	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
		MACHINE CONDITION & CLEANLINESS	<input type="checkbox"/>	<input type="checkbox"/>	FUSIBLE LINK INSTALLED	<input type="checkbox"/>	<input type="checkbox"/>	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>	<input type="checkbox"/>
		LAMP ASSEMBLY CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	EMERGENCY CLOSING OF LID UNOBSTRUCTED	<input type="checkbox"/>	<input type="checkbox"/>	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	<input type="checkbox"/>	<input type="checkbox"/>

USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
TXR000050930			

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5163055
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993				717	
PG III (D039) (ERG#128) 6.7 LBS/GAL					
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993				801	
PG III RC (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)					
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE)				11268	
UN3257 PG III (D018, D027, D039, D040) (ERG#153)					

DESIGNATED FACILITY NAME AND ADDRESS	SAFETY-KLEEN SYSTEMS, INC	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
			STATE ID NO.

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE
		<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INVOICE #	AMOUNT \$	INVOICE #
		AMOUNT \$
PREVIOUS CREDIT CARD NO.		
CREDIT CARD NO.	AMEX	EXP. DATE
	VISA	
	MC	
CUSTOMER REFERENCE		

MANIFEST NO.	17612
LDR MESSAGE	
MANIFEST CODE	SEQ #
	6 D
IN THE EVENT OF AN EMERGENCY CALL	

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

By: SCOTIE COX
 Print Customer Name

By: Scottie Cox
 Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	930.00
DO NOT WRITE IN THE AREA BELOW	
1004974521	
003456	

3. Shipper's Name and Mailing Address **AVDEL CHERRY LLC**
614 NC 200 HWY
STANFIELD NC 28163

4. Shipper's Phone **(704) 888-7140**

5. Transporter 1 Company Name **SAFETY KLEEN SYSTEMS, INC** 6. US EPA ID Number **TXR000050930** A. Transporter's Phone **704 375-0098**

7. Transporter 2 Company Name **CLEANLITES RECYCLING INC** 8. US EPA ID Number **SCR000764969** B. Transporter's Phone **864 503-9900**

9. Designated Facility Name and Site Address **050516** 10. US EPA ID Number **SCR000764969** C. Facility's Phone **864 503-9900**

CLEANLITES RECYCLING INC
100 FINE RD
SPARTANBURG SC 29303

11. Shipping Name and Description		12. Containers		13. Total Quantity	14. Unit Wt/Vol
HM		No.	Type		
a.	USED ELECTRONIC SCRAP FOR RECYCLING (NOT USDOT OR USEPA REGULATED)	801	CF	0500	P
b.	Universal waste lamps NOT USDOT Regulated	001	CF	0080	
c.					
d.					

15. Special Handling Instruction and Additional Information

MFST R/T#109731363 0002-8866-81
EMERGENCY RESP 800-468-1760(24 HR). A) NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 167907 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name: _____ Signature required here if US DOT regulated: _____ Month Day Year: . . .

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name: **SCOTIE COX** Sign here if material is not DOT regulated: *Scotie Cox* Month Day Year: **07/18/08**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: **Kevin L Miller** Signature: *Kevin L Miller* Month Day Year: **07/18/08**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: _____ Signature: _____ Month Day Year: . . .

19. Discrepancy Indication Space

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

Printed/Typed Name: _____ Signature: _____ Month Day Year: . . .



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551

FED. ID NO. 396090019

DRAGON - 150

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0096	STEVE HETU	06/02/08			0036731340
CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS			
CUSTOMER SEGMENT	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C	
LOCATION	YES	TAX EXEMPTION NO.			

1	2	3	4	5	6	7	8	9	0
---	---	---	---	---	---	---	---	---	---

CHERRY LLC

B
I
L
L

14 NC 200 HWY
STANFIELD NC 28163

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
10/11/07	213700		919-888-8116	24-186-7500		2675	2675	2675

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS				CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	RELEASE NO.	MSGS GIVEN
									CLEAN	SPENT	2 SP. CONT.	SK DOT								
	088888	40139417	81.0000	2										12						
	088888	40158050	81.0000	2	81.00		81.00							12						
	010044			1	8.00	0.00	8.00	0.00						0						
	0100007			1	17.11	0.00	17.11	0.00						0						

TOTAL-SERVICE/PRODUCTS	349.11	CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	LAMP ASSEMBLY CONDITION	FUSIBLE LINK INSTALLED	EMERGENCY CLOSING OF LID UNOBSTRUCTED			LOCAL PHONE NO. STICKER AFFIXED TO MACHINE		

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5163055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.
						0 TO 220 LBS./MONTH
						220 LBS. TO 2,200 LBS./MONTH
						GREATER THAN 2,200 LBS./MONTH

DESIGNATED FACILITY NAME AND ADDRESS	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.	STATE ID NO.
--------------------------------------	---	----------------	--------------

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$
EXP. DATE	EXP. DATE			

MANIFEST NO.	LDR MESSAGE
LDR NOT RECD	MANIFEST CODE
	SEQ #
	2 D

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

By: Robert E. Mullins
Print Customer Name

By: [Signature]
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	349.11
DO NOT WRITE IN THE AREA BELOW	
0036731340	
0002-8866-81 -2	

SERVICE AND SALES ACKNOWLEDGMENT

IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No. 3134

2. Page 1 of

3. Shipper's Name and Mailing Address
AVDEL CHERPY LLC
614 NC 200 HWY

4. Shipper's Phone 704 388 7140 STANFIELD NC 28163

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

7. Transporter 2 Company Name SAFETY-KLEEN SYSTEMS, INC

8. US EPA ID Number TXR068858311

B. Transporter's Phone 704 375-0098

9. Designated Facility Name and Site Address
SAFETY-KLEEN SYSTEMS, INC. 000630
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

10. US EPA ID Number

C. Facility's Phone

SCD077995488

803 356-4061

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

HM	No.	Type	Quantity	Unit Wt/Vol
a.		2 DM	600	
b.		2 DM	500	
c.				
d.				

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760(24 HR). A) NONE B) NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 23136 B: 1003 C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name
Robert E. Mullins

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name
Robert E. Mullins

Sign here if material is not DOT regulated

Month Day Year 6 11 08

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name
GLEG WIRE

Signature

Month Day Year 6 11 08

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

SHIPPER

USE OR 16A 16B

TRANSPORTER

FACILITY

USE OR 16A 16B

5400 Legacy Dr.
 Cluster II, Building 3
 Plano, Texas 75024
 704-375-0098

CUSTOMER# 2080631 AVAIL CREDIT L11C
 SERVICE TAX: 0.06750 G14 NC 200 HWY
 COMS TAX: 0.06750
 PRODUCT TAX: 0.06750 STANFIELD
 PHONE 704-888-7140
 PURCHASE ORDER#

REFERENCE NBR
 000000000000
 SVC W/LK: 07 41
 SVC DATE: 12/08/07 10:39
 NC

TAX EXEMPTION NBR

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
10044 EXTENDED SERVICE AIR A FEE	0	0.0000	0.00	0.00
10007 FEE, FULL SURCHARGE NON TAX	0	0.0000	0.00	0.00
88888 875000 FUEL BLEND 11Q >1200	0	0.0000	0.00	0.00
S/N 40177158 CLEAN 0 SPENT 0				
SERVICE TERM 48				
CAUSE CODE 9				
88888 875480 LANTF NON USDOT HAZM	8	76.0000	0.00	608.00
S/N 40158050 CLEAN 0 SPENT 0				
SERVICE TERM 12				
88888 875220 SPECIFIC PROCESS NON	0	0.0000	0.00	0.00
S/N 40157770 CLEAN 0 SPENT 0				
SERVICE TERM 8				
CAUSE CODE 9				
88888 875480 LANTF NON USDOT HAZM	0	0.0000	0.00	0.00
S/N 40139417 CLEAN 0 SPENT 0				
SERVICE TERM 12				
CAUSE CODE V				
TOTAL SERVICE/PRODUCTS		608.0000	0.00	608.00

USEPA TRANSPORTER 1 (EXEMPTED) GENERATOR ID: N0310179726
 USEPA TRANSPORTER 2 GENERATOR STATE
 MANIFEST TRACKING # 84125 FURN EXEM. HL SK TRACKING # 103088630

DE-REGULATED LIQUID (CONTAINING HAZARDOUS MATERIALS, ICA AND CLASS, AND I)

NON-REGULATED LIQUID

TOTAL CONT 6	TYPE 1H	11L QTY 1800	UNIT W/VOL P SKUDJ 23136
CNT# 71205000339	QTY 300	PROF# 40158050	
CNT# 71205000340	QTY 300	PROF# 40158050	
CNT# 71205000341	QTY 300	PROF# 40158050	
CNT# 71205000342	QTY 300	PROF# 40158050	
CNT# 71205000343	QTY 300	PROF# 40158050	
CNT# 71205000344	QTY 300	PROF# 40158050	

NON-REGULATED LIQUID

TOTAL CONT 2	TYPE 1M	11L QTY 600	UNIT W/VOL P SKUDJ 23136
CNT# 71205000337	QTY 300	PROF# 40158050	
CNT# 71205000338	QTY 300	PROF# 40158050	

DESIGNATED FACILITY NAME/ADDRESS:
 SAFETY-KLEEN SYSTEMS, INC.
 130-A FRONTAGE ROAD

www.safety-kleen.com // 55


139 SKUDJ 23136 DOC# 84125
 81 EXPIRES 04/08 MANF# 00004
 LLC P#0875480-55G

55 

0340 SKUDJ 23136 DOC# 84125
 6-81 EXPIRES 04/08 MANF# 00005
 Y LLC P#0875480-55G

0 55 


341 SKUDJ 23136 DOC# 84125
 -81 EXPIRES 04/08 MANF# 00006
 LLC P#0875480-55G

55 

42 SKUDJ 23136 DOC# 84125
 81 EXPIRES 04/08 MANF# 00007
 LLC P#0875480-55G

55 

44 SKUDJ 23136 DOC# 84125
 31 EXPIRES 04/08 MANF# 00009
 -LC P#0875480-55G

55 

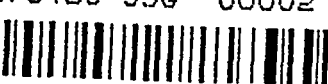
43 SKUDJ 23136 DOC# 84125
 11 EXPIRES 04/08 MANF# 00008
 LC P#0875480-55G

55 

18 SKUDJ 23136 DOC# 84125
 81 EXPIRES 04/08 MANF# 00003
 UDEL CHERRY LLC P#0875480-55G

SERVICE DOCUMENT ACTUAL (WT)/GAL 300 55 

071205000337 SKUDJ 23136 DOC# 84125
 0602-8866-81 EXPIRES 04/08 MANF# 00002
 UDEL CHERRY LLC P#0875480-55G

SERVICE DOCUMENT ACTUAL (WT)/GAL 300 55 

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

NCD10177972

Document No.

84125

2. Page 1 of

3. Shipper's Name and Mailing Address
 AUDEL CHERRY LLC
 614 NC 200 HWY

STANFIELD

NO-28163

4. Shipper's Phone
 704 838-7140

5. Transporter 1 Company Name
 SAFETY-KLEEN SYSTEMS, INC

6. US EPA ID Number
 TXR000050930

A. Transporter's Phone
 704 375-0038

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address
 000630
 SAFETY-KLEEN SYSTEMS, INC.
 130-A FRONTAGE ROAD
 LEXINGTON, SC 29073

10. US EPA ID Number
 SCD077995488

C. Facility's Phone
 503 356-4061

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

HM	No.	Type	Quantity	Unit Wt/Vol
a.		NON-REGULATED LIQUID	002 DM	600 P
b.		Non Regulated Liquid	006 DF	1000 P
c.				
d.				

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760 (24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
 SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 23136 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

IN EVENT OF EMERGENCY CALL
 1-800-468-1760 (24 hours)

TRANSPORTER # 1

FORM NO. 90291 (11/96)

SHIPPER

USE

16A

OR

16B

TRANSPORTER

FACILITY

USE

16A

OR

16B

Safety-Kleen

5400 Legacy Dr.
Cluster 11, Building 3
Plano, Texas 75024
704-375-0098

REFERENCE NBR
0034839523

CUSTOMER# 2630001 AVIANT CHEMRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFELD
PHONE 704-888-7140
PURCHASE ORDER#

SRVC W/LK: 07-34
SRVC DATE: 08/22/07 09:38
NC 28163

TAX EXEMPTION NBR:

PRODUCT / SERVICES

SERVICE / PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
10044 EXCLUDED SERVICE AREA FEE	0	0.0000	0.00	0.00
100001 FEE, FUEL SURCHARGE	1	7.8800	0.00	7.88
08088 875480 LANIF NON USDOT HAZM	9	76.0000	0.00	684.00
S/N 40158050 CLEAN O SPENT O SERVICE TERM 11				
TOTAL SERVICE/PRODUCTS		691.8800	0.00	691.88

USEPA TRANSPORTER 1 TXR000050930 GENERATOR ID NCJ101779726
USEPA TRANSPORTER 2 GENERATOR STATE
MANIFEST TRACKING # 39523 FIRM CUR. BL SK TRACKING # 408762347

IS DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
NON-REGULATED LIQUID

TOTAL CONT	TYPE UM	III QTY 2250	UNIT W/VOL P	SKDOT 23136
CNT# 70820003693	QTY 250	PROF# 40158050		
CNT# 70820003694	QTY 250	PROF# 40158050		
CNT# 70820003695	QTY 250	PROF# 40158050		
CNT# 70820003696	QTY 250	PROF# 40158050		
CNT# 70820003697	QTY 250	PROF# 40158050		
CNT# 70820003698	QTY 250	PROF# 40158050		
CNT# 70820003699	QTY 250	PROF# 40158050		
CNT# 70820003700	QTY 250	PROF# 40158050		
CNT# 70820003701	QTY 250	PROF# 40158050		

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD

LEXINGTON, SC 29073

USEPA ID NO SC01077995488	TOTAL CHARGE	691.88
STATE ID NO	WASTE MIN	0.00
	TOTAL DUE	691.88

UNPAID BALANCE THIS RECEIPT 691.88

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 220 - 2200 lbs/month

Customer certifies that (i) the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer.

The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution.

IN THE EVENT OF AN EMERGENCY CALL 1 800 468 1760 (24 hours)

www.safety-kleen.com

SKDOT# 136
EXPIRES 19/08
#0875480-55G

DOC# 39523
MANF# 00009



SKDOT# 136
EXPIRES 19/08
#0875480-55G

DOC# 39523
MANF# 00008



SKDOT# 136
EXPIRES 19/08
#0875480-55G

DOC# 39523
MANF# 00010



SKDOT# 136
EXPIRES 19/08
#0875480-55G

DOC# 39523
MANF# 00013



SKDOT# 136
EXPIRES 19/08
#0875480-55G

DOC# 39523
MANF# 00014



SKDOT# 136
EXPIRES 19/08
#0875480-55G

DOC# 39523
MANF# 00011



SKDOT# 136
EXPIRES 19/08
#0875480-55G

DOC# 39523
MANF# 00012



SKDOT# 136
EXPIRES 19/08
#0875480-55G

DOC# 39523
MANF# 00015



SKDOT# 136
EXPIRES 19/08
#0875480-55G

DOC# 39523
MANF# 00016



BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

3. Shipper's Name and Mailing Address

AVDEL CHERRY LLC
614 NC 200 HWY

STANFIELD

NC 28163

4. Shipper's Phone (704) 888-7140

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

SAFETY-KLEEN SYSTEMS, INC

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

10. US EPA ID Number

SCD077995488

C. Facility's Phone

803 356-4061

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

SHIPPER
a.
b.
c.
d.

HM	No.	Type	Quantity	Unit Wt/Vol

	009	DM	2250	P

15. Special Handling Instruction and Additional Information

MFST R/T#108762347 0002-8866-81
EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 23136 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

ACCOUNT# 2896681 AVULL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER# V201479

REFERENCE NBR
0034676468

SVC WEEK: 07-34
SRVC DATE: 08/22/07 09:44
NC 28163

NC CSG# 23, Tuesday, Week 34 of 2007
0:21:14 AM Departure Time: 8/21/2007 10:46:14 AM

TAX EXEMPTION NBR:

PRODUCT / SERVICES

SERVICE / PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
3230 TAX HANDLING N/C DRUM DROP	0	0.0000	0.00	0.00
10044 EXTENDED SERVICE AREA FEE	0	0.0000	0.00	0.00
100001 FEE, FUEL SURCHARGE	0	0.0000	0.00	0.00
83383 DRUM WASTE O.F.	2	240.0000	0.00	480.00
22555 OIL WASTE O.F. (02022555)	1	0.0000	0.00	0.00
CLEAN OIL SERVICE TERM 24				
SERVICE / PRODUCTS		480.0000	0.00	480.00

USEPA HAZARDOUS WASTE ID NUMBER 10000050930
USEPA TRANSPORTER 2
FORM CODE NR

GENERATOR ID NCD10179726
GENERATOR STATE NC

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZ/ADR CLASS, AND ID)
DRAINED USED OIL FILTERS
(NOT US DOT OR USEPA REGULATED)

TOTAL CONT 2 TYPE DM TIL QTY 400 UNIT W1/VOL P SKDOT 1476
CNT# 70728016275 QTY 200
CNT# 70728016276 QTY 200

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 VADKIN AVE

CHARLOTTE, NC 28205

USEPA ID NO NCD07060059 TOTAL CHARGE 480.00
STATE ID NO WASTE MIN 0.00

TOTAL DUE 480.00

UNPAID BALANCE THIS RECEIPT 480.00

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 220 - 2200 lbs/month

Customer certifies that (i) the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgment is duly authorized to sign and bind Customer. The following provision is applicable to Safety Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean part/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution.
IN THE EVENT OF AN EMERGENCY CALL 1 800 408 1760 (24 hours)

Chip Mooneyham
SIGNATURE NAME: CHIP MOONEYHAM

www.safety-kleen.com // 704-375-0098

6681

dit Status: N/A
ID: NCD101779726
Required: No
iness Type
number: 9

CHNOLOGIES Service Price Code: 2288
Product Price Code: 2340

Asset Tag#	Qty	AMB	Unit Price	Price	Tax Rate	SKDOT	Contract
	1	N	\$0.00	\$0.00		0	
	1	N	\$8.00	\$8.00		0	
	1	N	\$7.88	\$7.88		0	
	1	N	\$0.00	\$0.00		0	1476

Labels 3
Legal Backer Not Needed

Customer Service Notes:

* BLANKET# V201479 WE PAY AT \$.40 PER GALLON

Customer's Waste History:

Date	SKDOT#	Qty (in lbs)	Hazardous?	Core
06/19/2007	801	174	H	
05/09/2007	12700	14400	N	
05/08/2007	12700	15200	N	
05/02/2007	11130	60	N	

Allied Products Sales History:

Year-Weeks	PSO #	Description
2007-26 2007-18 2007-6	822	DEGREASER, HEAVY
2007-2 2006-46	829	CLEANER, SPRAY AT
2007-12 2007-2 2006-35	3206	BOX FLOR BULBS 4'
2007-18 2007-2	3207	BOX FLOR BULBS 8'
2007-18 2007-12	3230	TAX HANDLING N/C
2007-18	7001	NEW PIG MISC
2007-25 2007-24 2007-23	10044	EXTENDED SERVICE
2007-7 2007-4 2006-51	10047	CREDIT, PAY OIL CH
2007-19 2006-40	10901	VAC SVS SERVICEFE
2006-40	10918	VAC SVS AFTER HOI
2007-12 2007-2 2006-35	83206	WASTE 4' FLORBULI
2007-18	83207	WASTE 8' FLORBULI
2007-12	83383	DRUM,55 WASTE O.I
2007-25 2007-24 2007-23	100001	FEE, FUEL SURCHAF

Safety Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2000001
SERVICE TAX 0.06750
COMS TAX 0.06750
PRODUCT TAX 0.06750
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NBR 0038942363
SRVC WLEK: 07 15
SRVC DATE: 04/11/07 08:51
NC 28163

TAX EXEMPTION NBR:

PRODUCT / SERVICES

Table with columns: SERVICE / PRODUCT, QTY, UNIT PRICE, TAX, TOTAL CHARGE. Includes items like 100044 EXTENDED SERVICE AREA FEE, 100001 FEE, FULL SURCHARGE, 88899 875480 LANDFILL NON USDFIT HAZM, S/N 40139417 CLEAN 0, SERVICE TERM 52, CAUSE CODE V, 88899 875480 LANDFILL NON USDFIT HAZM, S/N 40158050 CLEAN 0, SERVICE TERM 52, and TOTAL SERVICE PRODUCTS 767.8800.

MSHA HAZARDOUS WASTE IDENTIFICATION
MSHA TRANSFER ID #
MANUFACTURER'S MODEL #

GENERATOR ID # 101779726
GENERATOR STATE
EPA ID OF SK TRACKING # 100333750

UNREGULATED LIQUID
TOTAL CONTAINER TYPE UNIT QTY 3150 UNIT W/VOL P SKUD# 23136

Table listing container details: CNT# 70405010251 QTY 350 PROF# 40158050, CNT# 70405010252 QTY 350 PROF# 40158050, CNT# 70405010253 QTY 350 PROF# 40158050, CNT# 70405010254 QTY 350 PROF# 40158050, CNT# 70405010255 QTY 350 PROF# 40158050, CNT# 70405010256 QTY 350 PROF# 40158050, CNT# 70405010257 QTY 350 PROF# 40158050, CNT# 70405010258 QTY 350 PROF# 40158050, CNT# 70405010259 QTY 350 PROF# 40158050.

NON REGULATED LIQUID
TOTAL CONTAINER TYPE UNIT QTY 350 UNIT W/VOL P SKUD# 23136
CNT# 70405010260 QTY 350 PROF# 40158050

DESIGNATED FACILITY NAME
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD

LEXINGTON, SC 29073

MSHA HAZARDOUS WASTE IDENTIFICATION
SHA# ID NO
TOTAL CHARGE 767.88
WASTE MIN 0.00
TOTAL DUE 767.88

INVOICE TOTAL THIS RECEIPT 767.88

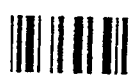
- Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid works/tructed? Yes
Machine properly grounded? Yes
Spent solvent met acceptance criteria? Yes

GENERATOR STATUS 220 2200 lbs/month

Customer certifies that (1) the above named materials are...
for transportation according to the applicable...
Department of Transportation and (2) is authorized...
of the... in the characterization of the waste...
generating the waste... Customer agrees to pay the...
charges and to be bound by the terms and conditions...
The General Terms and Conditions provided...
(b) any SK agreement signed by Customer and SK...
benefit by reference...
covered section, SK is authorized to...
be a... Customer certifies that the...
Acknowledgment is duly authorized to sign and...
The following provision is applicable to...
point you clean... Customer agrees that...
solvent... into the solvent...
Finality any hazardous waste...
to the extent such introduction...

www.safety-kleen.com

70 # 42363
APP # 00004



OC # 42363
MANF # 00005



W

63

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2363
19

1363

2363
11

2363
12

2363
13

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

NC D101770726

4-3-3

3. Shipper's Name and Mailing Address

AVDEL CHERRY LLC
614 NC 200 HWY

STANFIELD

NC 28163

4. Shipper's Phone (704 888-7140

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

~~SAFETY-KLEEN SYSTEMS, INC~~

~~TXR000050930~~

~~704 375 0098~~

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

000630

10. US EPA ID Number

C. Facility's Phone

SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

SCD077995488

803 356-4061

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

	HM	No.	Type	Total Quantity	Unit Wt/Vol
a.		09	OF DM	3150	P
b.			DM		P
c.	X	01		350	P
d.					

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760(24 HR). MFST R/T#108353758 0002-8866-81
IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 23136 B: 1003 C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

04/11/07

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

04/11/07

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

04/11/07

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

REFERENCE NBR
0033939433

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERV W/1 TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-868-7140
PURCHASE ORDER#

SRVC WEEK: 07-14
SRVC DATE: 04/05/07 13:19
NC 28163

TAX EXEMPTION NBR:

NC 28163

EPA ID Number	A. Transporter
EPA ID Number	B. Transporter
EPA ID Number	C. Facility's
77995488	8

PRODUCT/SERVICES

SERVICE / PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
10044 EXTENDED SERVICE AREA FEE	0	0.0000	0.00	0.00
100001 FEE, FUEL SURCHARGE	1	7.8800	0.00	7.88
88888 875480 LANDF NON USDOT HAZM	1	76.0000	0.00	76.00
S/N 40139417 CLEAN 0 SPENT 0				
SERVICE TERM 52				
TOTAL SERVICE/PRODUCTS		83.8800	0.00	83.88

USEPA TRANSPORTER 1 TXR000050930
USEPA TRANSPORTER 2
MANIFEST TRACKING # 39433

GENERATOR ID NCU101779726
GENERATOR STATE
FORM # 1084 1084 1084 1084 KING # 108348565

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING CLASS, AND ID)
USED OIL AND ABSORBENT MIXTURE
(NOT USDOT HAZARDOUS MATERIAL)
TOTAL CONT 1 TYPE OF TIL QTY IN 1 W/VOL P SKUDT 1003
CNT# 71403012034 QTY 300 PROF#

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD

LEXINGTON,

USEPA ID NO SCU077995400
STATE ID NO

83.88
0.00
83.88

UNPAID BALANCE THIS MONTH 83.88

- Machine clean and good condition? Yes
- Decals in place and legible? Yes
- Fusible link installed? Yes
- Emergency closing of lid mechanism test? Yes
- Machine properly grounded? Yes
- Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 220 - 2200 lbs/month

Customer certifies that (1) the above material is properly classified, packaged, marked and labeled, and is in proper condition for transportation according to the applicable regulations of the Department of Transportation and (2) no spillage or leakage has occurred either in the characteristics of the waste or in the process generating the waste/material. Customer certifies that the above charges and to be bound by the terms and conditions set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgment is duly authorized to sign and bind Customer.

The following provision is applicable to Safety Kleen's parts cleaner and paint gun cleaner services. Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution.

IN THE EVENT OF AN EMERGENCY CALL 1 800 468-1760 (24 hours)

Larry Gleason

SIGNATURE NAME: LARRY GLEASON

www.safety-kleen.com

(table) Document No. 2. Page 1 of 1
39433

NC 28163

EPA ID Number A. Transporter

EPA ID Number B. Transporter

EPA ID Number C. Facility's

77995488 8

12

α

FR/T#108348565 00 UNDELIVERABLE RETURN TO SUBSEQUENT CARRIERS

1003 B: C:

above-named materials are properly classified, described, and packaged according to the applicable regulations of the Department of Transportation.

Signature: *Larry Gleason*

Signature: *Phil Mullis*

noted in Item 19.

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

39433

3. Shipper's Name and Mailing Address

AVDEL CHERRY LLC
614 NC 200 HWY

NC D101779725

4. Shipper's Phone (

704 888-7140

STANFIELD

NC 28163

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

SAFETY-KLEEN SYSTEMS, INC

TXR000050930

704 375-0098

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

000630
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

SCD077995488

803 356-4061

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

HM

a. USED OIL AND ABSORBENT MIXTURE
(NOT USDOT HAZARDOUS MATERIAL)

201 D 300

P

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 1003 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

LARRY GILMAN

Larry Gilman

10/4/05

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Philip Mullis

Philip Mullis

10/4/05

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

SHIPPER

USE OR 16A 16B

TRANSPORTER

FACILITY

USE OR 16A 16B



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551

FED. ID NO. 396090019

BRANCH-TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	TOM PEERY		07		M004030763
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			BUSINESS TYPE	CHAIN	OUTER COUNTY
			LOCATION		TAX EXEMPTION NO.
			303101		

GENERATOR CUSTOMER

2886681

Arde/Cherry LLC
614 N.C. 200 Hwy
Stanfield, N.C. 28163

B I L L

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE	ASSOC. CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
3-21-07	433819		704-888-7140		FW				

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS		CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	CHANGE SCH. DATE (YR MM)	INV. CODE	PROMO NO.	MSI	
									CLEAN	SPENT								# OF CONT.
2	22414	Fluorescent Bulb Progs		3														
3	3206		+19.92 ea.	3	174.70	10.11	159.87											
4	3206			3	N/C		N/C											
11							149.70											

TOTAL-SERVICE/PRODUCTS										159.87	CHECK APPROPRIATE BOXES		MACHINE CONDITION & CLEANLINESS	<input type="checkbox"/>	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	<input type="checkbox"/>	YES	NO	MACHINE PROPERLY GROUNDED	<input type="checkbox"/>	YES	NO															
USEPA TRANSPORTER 1 ID NO.										USEPA TRANSPORTER 2 ID NO.										GENERATOR USEPA ID NO.										GENERATOR STATE ID NO.									
TXR000050930																																							

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)										12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5163055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:									
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993													717		0 TO 220 LBS./MONTH									
APG III (D039) (ERG#128) 6.7 LBS/GAL													801		INITIALS									
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993															220 LBS. TO 2,200 LBS./MONTH									
APG III RO (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)													14950		INITIALS									
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE)															GREATER THAN 2,200 LBS./MONTH									
UN3267 PGIII (D006, D018, D027, D039, D040) (ERG153) 7.97G															INITIALS									
See Bill of Lading										3 CF	120 P													

DESIGNATED FACILITY NAME AND ADDRESS										SAFETY-KLEEN SYSTEMS, INC.										USA EPA ID NO. SCRDD764963									
Clean Sites Recycling										100 Fine Rd. Spartanburg, S.C. 29303										STATE ID NO.									

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$
PREVIOUS CREDIT CARD NO.			
CREDIT CARD NO.		AMEX	EXP. DATE
		VISA	
		MC	

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #
	4 D
IN THE EVENT OF AN EMERGENCY CALL	

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Print Customer Name: Carroll Pearson

By: [Signature]
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	159.87
DO NOT WRITE IN THE AREA BELOW	
M004030763	
003456	

SERVICE AND SALES ACKNOWLEDGMENT

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 9

NE0101779726

305103

3. Shipper's Name and Mailing Address
AVDEL CHERRY LLC
614 NC 200 HWY

STANFIELD

NC 28163

4. Shipper's Phone 704 888-7140

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

SAFETY-KLEEN SYS. INC.

TXR000050930

800 669-5740

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

CLEANLITES RECYCLING INC
100 FINE RD
SPARTANBURG SC 29303

SCR000764969

864 503-9900

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

HM

a. **UNIVERSAL WASTE LAMPS**
NOT USDOT REGULATED

3 CF

120 P

b.				
c.				
d.				

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760 (24 HR) IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 11130 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

10/31/07

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

10/31/07

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Philip Mullis

Philip Mullis

10/31/07

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

SHIPPER

USE OR 16A 16B

TRANSPORTER

FACILITY

USE OR 16A 16B

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

REFERENCE NBR
0033759153

CUSTOMER# 2889681 AVONIL CHEMRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

SRVC W/LK: 07-12
SRVC DATE: 03/21/07 09:41
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE / PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
3230 TAX HANDLING N/C DRUM UNOP	0	0.0000	0.00	0.00
100001 FEE, FUEL SURCHARGE	1	7.8800	0.00	7.88
10044 EXTENDED SERVICE AREA FEE	0	0.0000	0.00	0.00
83383 DRUM, 55 WASTE O.F.	3	240.0000	0.00	720.00
22565 OIL SERVICE (02/022565)	1	0.0000	0.00	0.00
CLEAN O SPENT O				
SERVICE TERM 24				
TOTAL SERVICE/PRODUCTS		727.8800	0.00	727.88

USEPA TRANSPORTER 1 IXR000050930
USEPA TRANSPORTER 2
FORM CODE NR

GENERATOR ID NCD10179726
GENERATOR STATE 7

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
DRAINED USED OIL FILTERS
(NOT USED OR USEPA REGULATED)

TOTAL CONT 3 TYPE UM ITL QTY 750 UNIT WT/VOL P SKU01 1476
CNT# 70306014022 QTY 250
CNT# 70306014023 QTY 250
CNT# 70306014024 QTY 250

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE

CHARLOTTE, NC 28205
TOTAL CHARGE 727.88
WASTE MIN 0.00
TOTAL DUE 727.88

UNPAID BALANCE THIS RECEIPT 727.88

- Machine clean and good condition? Yes
- Decals in place and legible? Yes
- Fusible link installed? Yes
- Emergency closing of lid unobstructed? Yes
- Machine properly grounded? Yes
- Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 220 - 2200 lbs/month

Customer certifies that (i) the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgment is duly authorized to sign and bind Customer.

The following provision is applicable to Safety Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution.

IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

Handwritten signature

ST FORM

	DATE	INITIAL
CSM		
ADMIN.		
CSM		
CSR		
CSM		
QUESTOR		

ICLE ONE

NO
CWS NEW PLACEMENT OTHER

Handwritten mark

Handwritten lines and marks

QTY	PRICE
1	300.00

www.safety-kleen.com



PLACEMENT FORM

FOR SERVICE CALL 704-375-0098	BRANCH MANAGER TOM PEERY	REFERENCE NUMBER R001581611
DUNS NO. 05-397-6551	FED. ID NO. 396090019	NAME M3940588
BILL TO (IF DIFFERENT FROM LOCATION)		SIGN

28816681

GENERATOR LOCATION

NAME AUFEL CHERRY TEXTRON	NAME
DELIVERY ADDRESS 11111 N. 200 W. RD	DELIVERY ADDRESS
INFORMATION/ATTENTION LINE	INFORMATION/ATTENTION LINE
CITY & STATE STANFORD MO	CITY & STATE
ZIP 64304	ZIP
TAX CODE	TAX CODE

LOCATION 303779	SIC CODE
BUSINESS TYPE 9 2788	SALES TAX EXEMPTION NUMBER

DATE PLACED 11-17-07	SALES REP NO. 430778	BLANKET	TEMPORARY	CUSTOMER PHONE NO. 704-888-7140	HANDLING CODE	CREDIT CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
-------------------------	-------------------------	---------	-----------	------------------------------------	---------------	-------------	-------------	--------------	-------------

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	SOLVENT/DRUMS	CC	SERVICE TERM	SCHEDULE	FREE INV.	PROMO NO.	RELEASE NO.	MSDS GIVEN
1	88000	40177158	30 gal Waste Solvent	1	130.00	-	130.00			50					
2	88200	975000			130.32		130.32								

TOTAL SERVICE/PRODUCTS

USEPA TRANSPORTER 1 ID NO. TXR000050930	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	PLACEMENT CODES	12. CONTAINERS NO. TYPE	13. TOTAL QUANTITY	14. UNIT WTVOL	SK DOT NUMBER	5163055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:
11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)										0 TO 220 LBS./MONTH
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993								717		
PC III (D039) (ERG 128) 6.7 LBS/GAL										INITIALS
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993								801		220 LBS. TO 2,200 LBS./MONTH
PC III (D041) (ERG 128) 6.7 LBS/GAL (D018, D039, D040)										INITIALS
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE)								950		GREATER THAN 2,200 LBS./MONTH
PC III (D006, D008, D018, D027, D039, D040) (ERG 153) 7.9 L/G										INITIALS

DESIGNATED FACILITY NAME AND ADDRESS: SAFETY-KLEEN SYSTEMS, INC. USA EPA ID NO. STATE ID NO.

PAYMENT SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$
CREDIT CARD NO.	AMEX	VISA	EXP. DATE	
CUSTOMER REFERENCE INFORMATION				

MANIFEST NO. 000197318545
LDR MESSAGE

MANIFEST CODE SEQ # 4 D

IN THE EVENT OF AN EMERGENCY CALL 1-800-669-5740

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

Print Customer Name: *Luxy Herson*

By: *[Signature]*
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	130.32
TOTAL DUE	130.32
DO NOT WRITE IN AREA BELOW	
M3940588	
P001581611	
430778	

BRANCH - TSD PART NO. 1-800-669-5740

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NCD101779726	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number 100187368 SKS		
5. Generator's Name and Mailing Address AVDEL CHERRY TEKTRON 614 NC 200 HWY STANFIELD NC 28163 Generator's Phone: 704-886-7110				6. Generator's Site Address (if different than mailing address)			
6. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC				U.S. EPA ID Number TXR000050930			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address SAFETY-KLEEN SYSTEMS, INC. 3700 LAGRANGE ROAD SMITHFIELD KY 40068 Facility's Phone: 502-845-2453				U.S. EPA ID Number 000658 KYD053348108			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes	
		No.	Type				
X	1. RO WASTE PETROLEUM DISTILLATES, N.O.S 3 UN1268 PG III (D001) (ERG#128)	001	DM	0150	P	D001	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information SK TRCK#108098478 0002886681							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offeror's Printed/Typed Name LAUREY GRAYSON				Signature <i>Laurey Grayson</i>		Month Day Year 01/12/07	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Kevin L Mellie				Signature <i>Kevin L Mellie</i>		Month Day Year 01/12/07	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator)				U.S. EPA ID Number			
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name				Signature		Month Day Year	

GENERATOR

TRANSPORTER INTL

DESIGNATED FACILITY



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551

FED. ID NO. 396090019

BRANCH-TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	TOM PEERY		09-02		M003909291
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			BUSINESS TYPE	CHAIN	OUTER COUNTY
			SVC. P/C	PROD. P/C	
			LOCATION	TAX EXEMPTION NO.	
			303101		

2886681

Autlet Cherry Textiles
614 NC Hwy 200
Stanfield NC 28163

BILL

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE	ASSOC. CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
7/1/05	1135	V210001	704-888-7148		PW				

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (Y/M/W)	INV. CODE	PROMO NO.	MSDS GIVEN	
									CLEAN	SPENT	# OF CONT.								SK DOT
1	22944												12						
2	23266		4 FT 2016	03	114		46												
3																			
4																			
5																			
6																			
7																			
8																			
9																			
10																			
11																			
12																			

TOTAL-SERVICE/PRODUCTS	USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	CHECK APPROPRIATE BOXES	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
	TXR000050930				MACHINE CONDITION & CLEANLINESS	<input type="checkbox"/>	<input type="checkbox"/>	FUSIBLE LINK INSTALLED	<input type="checkbox"/>	<input type="checkbox"/>	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>	<input type="checkbox"/>
					LAMP ASSEMBLY CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	EMERGENCY CLOSING OF LID UNOBSTRUCTED	<input type="checkbox"/>	<input type="checkbox"/>	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	<input type="checkbox"/>	<input type="checkbox"/>

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WGT/VOL	SK DOT NUMBER	5163065	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 (D039)(ERG#128) 6.7LBS/GAL				717		0 TO 220 LBS./MONTH
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)				801		220 LBS. TO 2,200 LBS./MONTH
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE) UN3267 PGIII (D006, D008, D018, D027, D039, D040)(ERG153) 7.9#/G				950		GREATER THAN 2,200 LBS./MONTH

DESIGNATED FACILITY NAME AND ADDRESS	SAFETY-KLEEN SYSTEMS, INC.	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
			STATE ID NO.

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE
		<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INVOICE #	AMOUNT \$	INVOICE #
		AMOUNT \$
PREVIOUS CREDIT CARD NO.	CREDIT CARD NO.	EXP. DATE

MANIFEST NO.	09281
LDR MESSAGE	
MANIFEST CODE	SEQ #
	3 D

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

Print Customer Name: LARRY SPANSON

By: [Signature]
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	1/c
DO NOT WRITE IN THE AREA BELOW	
M003909291 003456	

SERVICE AND SALES ACKNOWLEDGMENT

IN THE EVENT OF AN EMERGENCY CALL

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

NC D101779726

3. Shipper's Name and Mailing Address

AVDEL CHERRY TEXTRON
614 NC 200 HWY

STANFIELD

NC 28163

4. Shipper's Phone (704) 888-7140

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

7. Transporter 2 Company Name SAFETY KLEEN SYS. INC.

8. US EPA ID Number TXR000050930

B. Transporter's Phone

800 669-5740

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

CLEANLITES RECYCLING INC
100 FINE RD
SPARTANBURG SC 29303

SCR000764969

864 503-9900

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a.	HM	Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
			No.	Type		
		UNIVERSAL WASTE LAMPS NOT USDOT REGULATED	003	CF	0/20	P
b.						
c.						
d.						

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760(24 HR). MFST R/T#108098480 0002-8866-81
IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 11130 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

LARRY GLASSON

Signature: Larry Glasson
Month Day Year: 01/12/07

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Kevin L Melli

Signature: Kevin L Melli
Month Day Year: 01/12/07

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

SHIPPER

USE

16A

OR

16B

TRANSPORTER

FACILITY

USE

16A

OR

16B



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551

FED. ID NO. 396090019

BRANCH-TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	TOM PEERY		09-02		M003909292
			CREDIT CODE	PREVIOUS BALANCE	BAL OVER 60 DAYS
			BUSINESS TYPE	CHAIN	OUTER COUNTY
				7	
			LOCATION	TAX EXEMPTION NO.	
			303101		

2 8 8 6 6 7 1

Arbel Cherry Taster
614 W. Hwy 200
Stanfield N.C. 27167

BILL

WELLASK

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE	ASSOC. CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
07-17	3456	V210001	704-375-0098			PW			

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS				CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	CHANGE SCH DATE (YR/MO)	RV. CODE	PROMO NO.	MSDS GIVEN
									CLEAN	SPENT	# OF CONT.	SK DOT							
1	2886671	40159110	376221 386 each	2	632.00	-	632.00							52	08/02				

TOTAL-SERVICE/PRODUCTS							632.00												
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	CHECK APPROPRIATE BOXES		MACHINE CONDITION & CLEANLINESS	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO					
TXR000050930				<input type="checkbox"/>	<input type="checkbox"/>	LAMP ASSEMBLY CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	FUSIBLE LINK INSTALLED	<input type="checkbox"/>	<input type="checkbox"/>	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>	<input type="checkbox"/>					
				<input type="checkbox"/>	<input type="checkbox"/>	EMERGENCY CLOSING OF LID UNOBSTRUCTED	<input type="checkbox"/>	<input type="checkbox"/>	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>					

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5163055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 (D039)(ERG#128) 6.7LBS/GAL				717		0 TO 220 LBS./MONTH
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)				801		220 LBS. TO 2,200 LBS./MONTH
WASTE CORROSIVE LIQUID, BASIC ORGANIC NOS (MONOETHANOLAMINE) UN3267 PGIII (D006, D008, D018, D027, D039, D040) (ERG153) 7.9#/G				950		GREATER THAN 2,200 LBS./MONTH

DESIGNATED FACILITY NAME AND ADDRESS SAFETY-KLEEN SYSTEMS, INC. USA EPA ID NO. STATE ID NO.

PAYMENT METHOD	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE
			<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
	INVOICE #	AMOUNT \$	INVOICE #
			AMOUNT \$
PREVIOUS CREDIT CARD NO.	CREDIT CARD NO.	AMEX VISA MC	EXP. DATE

MANIFEST NO.	09292
LDR MESSAGE	
MANIFEST CODE	SEQ #
	4 D
IN THE EVENT OF AN EMERGENCY CALL	

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Print Customer Name: LARRY BENSAL

By: [Signature]
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	632.00
DO NOT WRITE IN THE AREA BELOW	
M003909292 003456	

SERVICE AND SALES ACKNOWLEDGMENT

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

NCD101070726

Document No.

09297

2. Page 1

of 1

3. Shipper's Name and Mailing Address
 AVDEL CHERRY TETRON
 614 NC 200 HWY

STANFIELD NC 28163

4. Shipper's Phone (704) 888-7140

5. Transporter 1 Company Name

SAFETY-KLEEN SYSTEMS, INC

6. US EPA ID Number

TXP000050930

A. Transporter's Phone

704 375 0098

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address 000654

SAFETY-KLEEN SYSTEMS, INC
 633 E 138TH ST
 DOLTON, IL 60419

10. US EPA ID Number

ILD980613913

C. Facility's Phone

708 225-8100

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a.	HM	Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
			No.	Type		
		NON REGULATED SOLID	002	DM	0.60	P
b.						
c.						
d.						

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
 SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 25383 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

01/12/07

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

01/12/07

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Kevin L. Mullis

Signature

[Signature]

Month Day Year

01/12/07

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

.

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

ACCOUNT # 2890061 ADDEL CHERRY HAZM
SERVICE TAX: 0.06750 614 NC 200 HWY
CUMS TAX: 0.04750
PRODUCT TAX: 0.04 50 STAFF FIELD
PHONE 704-888-7140
PURCHASE ORDER# 03549

REFERENCE NBR
DATE: 01/12/07
SRVC W/LK: 07-02
SRVC DATE: 01/12/07 13:45
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
10001 FEE, FUEL SURCHARGE	1	7.8800	0.00	7.88
88888 875000 LANDF NON USDOT HAZM	13	76.0000	0.00	988.00
S/N 40158050 CLEAN 0 SPENT 0				
SERVICE TERM 52				
TOTAL SERVICE/PRODUCTS		1003.8800	0.00	1003.88

USEPA TRANSPORTER 1 EX000000050 GENERATOR ID NCU101779/26
USEPA TRANSPORTER 2 GENERATOR STATE
MANUFACT TRACKING # 03549 FORM CUBA BK SK TRACKING # 00000004

UNIT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
NON-REGULATED LIQUID
TOTAL CONT 13 TYPE UF TIL QTY 3900 UNIT WT/VOL? SKOOT 23136

CNT# 70109001607 QTY 300 PROF# 40158050
CNT# 70109001608 QTY 300 PROF# 40158050
CNT# 70109001609 QTY 300 PROF# 40158050
CNT# 70109001610 QTY 300 PROF# 40158050
CNT# 70109001611 QTY 300 PROF# 40158050
CNT# 70109001612 QTY 300 PROF# 40158050
CNT# 70109001613 QTY 300 PROF# 40158050
CNT# 70109001614 QTY 300 PROF# 40158050
CNT# 70109001615 QTY 300 PROF# 40158050
CNT# 70109001616 QTY 300 PROF# 40158050
CNT# 70109001617 QTY 300 PROF# 40158050
CNT# 70109001618 QTY 300 PROF# 40158050
CNT# 70109001619 QTY 300 PROF# 40158050

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD

LEXINGTON, SC 29073

USEPA ID NO SCD077995488	TOTAL CHARGE	1,003.88
STATE ID NO	WASTE MIN	0.00
	TOTAL DUE	1,003.88

AMOUNT DUE THIS RECEIPT 1,003.88

- Machine in good condition? Yes
- Details printed and legible? Yes
- Fusible link installed? Yes
- Emergency closing of lid unobstructed? Yes
- Machine properly grounded? Yes
- Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 220 - 2200 lbs/month

Customer certifies that (i) the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to customer or (b) any SK agreement signed by customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge customer's account for this transaction. Customer certifies that the individual signing this Service

ADDEL CHERRY TEX PRC070480-588 00015

SERVICE DOCUMENT

ACTUAL TOTAL 300

55



www.safety-kleen.com

549

3549

49

5

9

549

19

549

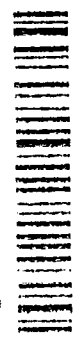
9

549

549

DOC # 03549

SKOOT# 23136
EXPIRES 12/31/08
MANF # 00014
PRC070480-588

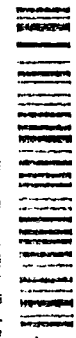


ACTUAL TOTAL 300

SERVICE DOCUMENT

DOC # 03549

SKOOT# 23136
EXPIRES 12/31/08
MANF # 00015
PRC070480-588



ACTUAL TOTAL 300

SERVICE DOCUMENT

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)
NC D101779726

Document No.

03544

2. Page 1
of 1

3. Shipper's Name and Mailing Address
**AVDEL CHERRY TEXTRON
614 NC 200 HWY**

STANFIELD

NC 28163

4. Shipper's Phone (**704 888-7140**)

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

~~SAFETY-KLEEN SYSTEMS, INC~~

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address
**000630
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073**

10. US EPA ID Number

SCD077995488

C. Facility's Phone

803 356-4061

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit

HM

No.

Type

Quantity

Wt/Vol

a. **NON-REGULATED LIQUID**

013

DM

3900

P

15. Special Handling Instruction and Additional Information

**MFST R/T#106088684 0002-8866-81
EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.**

SKDOT# A: 23136 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

LARRY STEVENSON

[Signature] 01/20/07

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Kevin L. Mollis

[Signature] 01/22/07

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

SHIPPER

USE 6A OR 6B

TRANSPORTER

FACILITY

USE 16A OR 16B



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551

FED. ID NO. 396090019

BRANCH-TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	TOM PEERY		06		M003644585
			CREDIT CODE	PREVIOUS BALANCE	BAL OVER 60 DAYS
			BUSINESS TYPE	CHAIN	OUTER COUNTY
			SVC. P/C	PROD. P/C	
			LOCATION	TAX EXEMPTION NO.	
			303101		

CUSTOMER

2 8 8 0 4 8 1

Advek Cherry Textron
614 N.C. 300 HWY
Stanfield N.C. 28163

B I L L

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE	ASSOC. CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
12/30/78	K32038								

DEPT	SERVICE/PRODUCT	NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS) (INITIAL)	CHANGE BOX DATE (YY MM)	INV. CODE	PROMO NO.	MSI GIVE
									CLEAN	SPENT	# OF CONT.							
1	3306	4FT Bulb Box		4	4160.80		4160.80											
2		A 57-66 EACH																
3		49.92																

TOTAL-SERVICE/PRODUCTS	339.30	CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	LAMP ASSEMBLY CONDITION		FUSIBLE LINK INSTALLED			LOCAL PHONE NO. STICKER AFFIXED TO MACHINE		
1K900050930						EMERGENCY CLOSING OF LID UNOBSTRUCTED			SPENT SOLVENT MEETS ACCEPTANCE CRITERIA		

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5163055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES. 0 TO 220 LBS./MONTH INITIALS 220 LBS. TO 2,200 LBS./MONTH INITIALS GREATER THAN 2,200 LBS./MONTH INITIALS
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993				717		
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993				801		
WASTE CORROSIVE LIQUID, BASIC ORGANIC, NOS (MONOETHANOLAMINE)				950		
UN3267 PGIII (D006, D008, D018, D027, D039, D040) (ERG153, 17, 5#75)						
Universal Waste Lamps Not usdot regulated	8	320	P	11130		

DESIGNATED FACILITY NAME AND ADDRESS	SAFETY-KLEEN SYSTEMS, INC.	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
safety-kleen systems 2320 Yorklin Ave (Stanfield N.C. 28163)			
			STATE ID NO.

PAYMENT INFORMATION	CASH	TOTAL RECEIVED	APPLY PAYMENT TO:	
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS	
	INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$
	PREVIOUS CREDIT CARD NO.			
	CREDIT CARD NO.		AMEX	EXP. DATE
			VISA	
			MC	

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #
	9 D
IN THE EVENT OF AN EMERGENCY CALL	

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Print Customer Name
LARRY JOHNSON

By: *[Signature]*
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	4160.80
DO NOT WRITE IN THE AREA BELOW	
M003644585	
432038	

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (if Applicable)

NCD101779726

Document No.

44589

2. Page 1 of 1

3. Shipper's Name and Mailing Address

AVDEL CHERRY TELETRON
614 NC 200 HWY

STANFIELD

NC 28163

4. Shipper's Phone (

704 888-7140

5. Transporter 1 Company Name

SAFETY-KLEEN SYS, INC.

6.

US EPA ID Number

TXR000050930

A. Transporter's Phone

800 669-5740

7. Transporter 2 Company Name

8.

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

050516
CLEANLITES RECYCLING INC
100 FINE RD
SPARTANBURG SC 29303

10.

US EPA ID Number

SCR000764969

C. Facility's Phone

864 503-9900

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a.	HM	Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
			No.	Type		
		UNIVERSAL WASTE LAMPS NOT USDOT REGULATED	008	CF	160 320	P
b.						
c.						
d.						

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 11130 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

LAIRY GLEASON

Lairy Gleason 12/31/06

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Clyde Bruce Crump

Clyde Bruce Crump

12/31/06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

SHIPPER

USE OR 16B

TRANSPORTER

FACILITY

USE OR 16B



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551

FED. ID. NO. 396090019

BHANCH-1SD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	TOM PEERY	0/28/06	06-35	23	0032542170

CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS		
D	2166.08	437.68		
BUSINESS TYPE	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C
09	0580	YES	2288	2340
LOCATION		TAX EXEMPTION NO.		
303101				

GENERATOR

BILL

0 0 0 2 - 8 8 6 6 8 1
AVDEL CHERRY TEXTRON

614 NC 200 HWY
STANFIELD NC 28163

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE	ASSOC. CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
9-1-06	13238	V201479	704-888-7140	34-420-7792	PW		.07	.07	.07

DEPT	SERVICE/PRODUCT	NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS		CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	CHANGE SCH. DATE (YY WW)	RV. CODE	PROMO NO.	RELEASE NO.	MSG. GVI	
									CLEAN	SPENT									
001	00014			1	8.00	0.00	8.00	0.00				0							
001	00001			1	7.88	0.00	7.88	0.00				0							
200	00088	10157770	316.0000	1	316.00		316.00					52							
200	00088	10157776	424.8000	2	424.80		424.80					52							

TOTAL-SERVICE/PRODUCTS	756.68	CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	LAMP ASSEMBLY CONDITION		FUSIBLE LINK INSTALLED			LOCAL PHONE NO. STICKER AFFIXED TO MACHINE		
TXR000050930		NCB101775726				EMERGENCY CLOSING OF LID UNOBSTRUCTED			SPENT SOLVENT MEETS ACCEPTANCE CRITERIA		

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL WT/VOL	14. UNIT WT/VOL	SK DOT NUMBER	5168055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES: 0 TO 220 LBS./MONTH INITIALS _____ 220 LBS. TO 2,200 LBS./MONTH INITIALS _____ GREATER THAN 2,200 LBS./MONTH INITIALS _____
A. NONregulated solid	9	2500	P	25383		
B. NON regulated solid	9	2500	P	25383		
C.						

DESIGNATED FACILITY NAME AND ADDRESS: *ENV Systems 2320 Yodkin Ave (Mail Office) # 28205*

I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.

USA EPA ID NO. _____
STATE ID NO. _____

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INVOICE #	AMOUNT \$	INVOICE #
AMOUNT \$		AMOUNT \$
PREVIOUS CREDIT CARD NO.	EXP. DATE	
CREDIT CARD NO.		AMEX VISA MC
CUSTOMER REFERENCE		

MANIFEST NO.	LDR MESSAGE
	LDR NOT REQ'D
MANIFEST CODE	SEQ#
	1-D
IN THE EVENT OF AN EMERGENCY CALL	
1-800-669-5740 (24 hours)	

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

LARRY OLSON
Print Customer Name

Larry Olson
By: Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	756.68
DO NOT WRITE IN THE AREA BELOW	
0032542170	
0002-8866-81 -2	

SERVICE AND SALES ACKNOWLEDGMENT

3. Shipper's Name and Mailing Address **AVDEL CHERRY TEXTRON**
614 NC 200 HWY
STANFIELD NC 28163
 4. Shipper's Phone (**704 888-7140**)

5. Transporter 1 Company Name **SAFETY-KLEEN SYSTEMS, INC** 6. US EPA ID Number **TXR000050930** A. Transporter's Phone **704 375-0098**

7. Transporter 2 Company Name 8. US EPA ID Number B. Transporter's Phone

9. Designated Facility Name and Site Address **050516**
CLEANLITES RECYCLING INC
100 FINE RD
SPARTANBURG SC 29303 10. US EPA ID Number **SCR000764969** C. Facility's Phone **864 503-9900**

11. Shipping Name and Description		12. Containers		13. Total Quantity	14. Unit Wt/Vol
HM		No.	Type		
a.	NON REGULATED SOLID	1	DM DF	200	P
b.	NON REGULATED SOLID	1	DM DF	200 400	P
c.					
d.					

15. Special Handling Instruction and Additional Information
EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR. SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.
MFST R/T#107666910 0002-8866-81
SKDOT# A: 25383 B: 25383 C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.
 Printed/Typed Name **LARRY GLASSON** Signature required here if US DOT regulated Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.
 Printed/Typed Name **LARRY GLASSON** Sign here if material is not DOT regulated Month Day Year **9 1 06**

17. Transporter 1 Acknowledgement of Receipt of Materials
 Printed/Typed Name **Clyde Bruce Crump** Signature **Clyde Bruce Crump** Month Day Year **9 1 06**

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

19. Discrepancy Indication Space

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

SHIPPER

USE OR 16A 16B

TRANSPORTER

FACILITY

USE OR 16A 16B



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551

FED. ID NO. 398090019

BRANCH-TSD

FOR SERVICE CALL 04-375-0098	BRANCH MANAGER TOM PEERY	DOC. EXP. 1/04/06	SCHEDULED SERVICE WEEK 06-36	SCHEDULED TERRITORY 23	REFERENCE NUMBER 0032542171
---------------------------------	-----------------------------	----------------------	---------------------------------	---------------------------	--------------------------------

CUSTOMER REFERENCE

00002-8866-81
AVDEL CHERRY TEXTRON

614 NC 200 HWY
STANFIELD NC 28163

B I L L

CREDIT CODE 0	PREVIOUS BALANCE 2168.08	BAL. OVER 60 DAYS 457.66
BUSINESS TYPE 09	CHAIN 0580	OUTER COUNTY YES
SVC. P/C 2288	-PROD. P/C 2340	
LOCATION 303101		TAX EXEMPTION NO.

SERVICE DATE 1/20/06	SALES REP NO. 132038	CUSTOMER P.O. NUMBER N201479	CUSTOMER PHONE # 04-888-7140	TAX CODE 34-420-7792	HANDLING CODE PW	ASSOC. CODE	SERVICE TAX .07	C.O.M.S. TAX .07	PRODUCT TAX .07
-------------------------	-------------------------	---------------------------------	---------------------------------	-------------------------	---------------------	-------------	--------------------	---------------------	--------------------

DEPT	SERVICE/PRODUCT	NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS		CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS/INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	RELEASE NO.	MISC GIVE	
									CLEAN	SPENT									# OF CONT.
1	00004			1	8.00	0.00	8.00	0.00				0							
2	000001			1	7.88	0.00	7.88	0.00				0							
3	008888	0158050	75.0000	17	1292.00		1292.00					52							

TOTAL SERVICE/PRODUCTS	1292.00	CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	LAMP ASSEMBLY CONDITION	FUSIBLE LINK INSTALLED	EMERGENCY CLOSING OF LID UNOBSTRUCTED	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA				

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5163055	1. CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:
None regulated liquid NONE	17	5,100	P	23136		0 TO 220 LBS./MONTH
						220 LBS. TO 2,200 LBS./MONTH
						GREATER THAN 2,200 LBS./MONTH

DESIGNATED FACILITY NAME AND ADDRESS: Safety-Kleen Systems 2320 Yarkin Ave Charlotte NC 28255

I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.

USA EPA ID NO. STATE ID NO.

PAYMENT INFORMATION	CHECK NUMBER	TOTAL RECEIVED	APPLY PAYMENT TO:
PREVIOUS CREDIT CARD NO.	INVOICE #	AMOUNT \$	TODAY'S SERVICE/SALE
EXPIRED	INVOICE #	AMOUNT \$	PREVIOUS BALANCE AS FOLLOWS
CREDIT CARD NO.	AMEX	VISA	MC
EXP. DATE	IN THE EVENT OF AN EMERGENCY CALL		

MANIFEST NO.	SEQ #
LD	2 D

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

LARRY G. [Signature]

Print Customer Name

By: [Signature]

Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	1292.00
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	1292.00
DO NOT WRITE IN THE AREA BELOW	
0032542171	
0002-8866-81 -2	

SERVICE AND SALES ACKNOWLEDGMENT

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)
NCD101779726

Document No.
2177

2. Page 1
of 1

3. Shipper's Name and Mailing Address
AVDEL CHERRY TEKTRON
614 NC 200 HWY

STANFIELD NC 28163
704 888-7140

4. Shipper's Phone ()
SAFETY-KLEEN SYSTEMS, INC

6. US EPA ID Number
TXR000050930

A. Transporter's Phone
704 375-0098

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

10. US EPA ID Number
SCD077995488

C. Facility's Phone
803 356-4061

11. Shipping Name and Description

12. Containers
No. Type

13. Total
Quantity

14. Unit
Wt/Vol

HM	Shipping Name and Description	No.	Type	Total Quantity	Unit Wt/Vol
a.	NON-REGULATED LIQUID	0017	DM	5.00	P
b.					
c.					
d.					

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 23136 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

SHIPPER

USE 16A OR 16B

TRANSPORTER

FACILITY

DOC # 23136
MANIF # 00014
SK # 08731707
#0875480-556
#0875480-81



3400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
800-669-5740
www.safety-kleen.com

PLACEMENT FORM

2 8 8 6 6 8 1

FOR SERVICE CALL 704-375-0098	BRANCH MANAGER TOM PEERY
----------------------------------	-----------------------------

REFERENCE NUMBER P001475242

DUNS NO. 05-397-6551 FED. ID NO. 396090019

NAME AITEF CHEMRY TEXTROW	NAME BILL TO (IF DIFFERENT FROM LOCATION)
DELIVERY ADDRESS CIVIL NO 200 HWY	DELIVERY ADDRESS
INFORMATION ATTENTION LINE	INFORMATION ATTENTION LINE
CITY & STATE STAMPALEVA NC	CITY & STATE
ZIP 28163	ZIP
TAX CODE	TAX CODE

NAME	TITLE	SIGN
1.		
2.		

LOCATION	SIC CODE
BUSINESS TYPE	CHAIN ASSOCIATION SVC. P/C PROD. P/C
SALES TAX EXEMPTION NUMBER 580	

DATE PLACED 8-23-06	SALES REP NO. 430778	CUSTOMER'S BUSINESS NUMBER 38	BLANKET	TEMPORARY	CUSTOMER PHONE NO. 704-888-7440	HANDLING CODE	CREDIT CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
------------------------	-------------------------	----------------------------------	---------	-----------	------------------------------------	---------------	-------------	-------------	--------------	-------------

DEPT.	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT-PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	SOLVENT/DRUMS			CC	SERVICE TERM	SCHEDULE (M/W)	FREE INV. CODE	PROMO NO.	RELEASE NO.	MSDS GIVEN
								CLEAN	SPENT	SK DOT							
	7344		Bulk Service	1	N/A												
	83306		All Bulk Boxes	4	57.60	400	228.00										
	83306		57.66 ea	4	N/A	N/A	230.64										

TOTAL SERVICE/PRODUCTS	REFUSED SERVICE EXPLAIN	NEW APPLICATION
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USEPA TRANSPORTER 1 ID NO. TXR000050930	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
--	----------------------------	------------------------	------------------------

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.) WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE) 8 UN3267 PGIII (D006, D008, D018, D027, D038, D039, D040) (ERG153)	12. CONTAINERS NO. TYPE	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER 456	5183058	CERTIFY THAT WASTE STREAMS ARE ONE OR MORE FOLLOWING (1) 220 LBS./MONTH INITIALS 220 LBS. TO 2,200 LBS./MONTH INITIALS GREATER THAN 2,200 LBS./MONTH INITIALS
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PG III (D039) (ERG#128) 6.7 LBS/GAL				717		
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PG III RQ (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)				801		

DESIGNATED FACILITY NAME AND ADDRESS SAFETY-KLEEN SYSTEMS, INC.	USA EPA ID NO.	STATE ID NO.
--	----------------	--------------

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INVOICE #	AMOUNT \$	INVOICE #
AMOUNT \$		AMOUNT \$
PREVIOUS CREDIT CARD NO.		

22444
LDR MESSAGE

MANIFEST CODE SEQ #
7 D

IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

1311 WATKINS
Print Customer Name

By: *Dist. [Signature]*
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	TOTAL DUE
	230.64
DO NOT WRITE IN AREA BELOW	
P001475242	
430778	

BRANCH - TSP
PART NO. 1360 (Rev 05/04)

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

NCD101779726

Document No.

22971

2. Page 1 of 1

3. Shipper's Name and Mailing Address

AVDEL CHERRY TEKTRON
614 NC 200 HWY

STANFIELD

NC 29163

4. Shipper's Phone (

704 888-7140

5. Transporter 1 Company Name

SAFETY-KLEEN SYS. INC

6. US EPA ID Number

TXR000050930

A. Transporter's Phone

800 669-5740

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

050516

CLEANLITE'S RECYCLING INC
100 FINE RD
SPARTANBURG SC 29303

10. US EPA ID Number

SCR000764969

C. Facility's Phone

864 503-9900

11. Shipping Name and Description

HM

a. UNIVERSAL WASTE LAMPS
NOT USDOT REGULATED

b.

c.

d.

12. Containers

No. Type

504 CF

13. Total Quantity

160

14. Unit Wt/Vol

P

15. Special Handling Instruction and Additional Information

MFST R/T#107638822 0002-8866-81
EMERGENCY RESP 800-468-1760 (24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 11130 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Clyde Bruce Crump

Signature

Clyde Bruce Crump

Month Day Year

8 25 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

B1

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)
NC 0000050930

Document No.
44579

2. Page 1 of 1

3. Shipper's Name and Mailing Address
614 NC 200 HWY

STANFIELD
704 888-7140

NC 28163

4. Shipper's Phone ()

5. Transporter 1 Company Name
SAFETY-KLEEN SYSTEMS, INC

6. US EPA ID Number
TKR000050930

A. Transporter's Phone
704 375-0098

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN SYSTEMS, INC
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

10. US EPA ID Number
SCD077995488

C. Facility's Phone
803 356-4061

11. Shipping Name and Description

12. Containers
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. HM USED OIL AND ABSORBENT MIXTURE
(NOT US DOT HAZARDOUS MATERIAL)

016 DM 2,560

b.

c.

d.

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760 (24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 1003 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

BILL WATKINS

Bill Watkins 18 12 106

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Clyde Bruce Crump

Clyde Bruce Crump

18 12 106

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

SHIPPER

USE OR 16A 16B

TRANSPORTER

FACILITY

USE OR 16A 16B



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FID. ID NO. 396090019

BRANCH-TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-8098	TOM PEERY		06		11003644581

2-8866-81

Delvel Cherry Textcon
614 NC 200 Hwy
Stairfield n.c. 28163

B
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R

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE	ASSOC. CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
4-2-506	432238	V201419							

DEPT	SERVICE/PRODUCT	NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	CHANGE SCH DATE (YR WKG)	INV. CODE	PROMO NO.	MST GIVE	
									CLEAN	SPENT	# OF CONT.								
1	5558	875910		1	312.00	31.84	333.84												
2					284.00	.02	284.00												
3	5414				NIC		NIC												
4																			
5																			
6																			
7																			
8																			
9																			
10																			
11																			
12																			

TOTAL SERVICE/PRODUCTS				333.84	CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD <input type="checkbox"/>	POOR <input type="checkbox"/>	DECALS IN PLACE AND LEGIBLE	YES <input type="checkbox"/>	NO <input type="checkbox"/>	MACHINE PROPERLY GROUNDED	YES <input type="checkbox"/>	NO <input type="checkbox"/>
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.		LAMP ASSEMBLY CONDITION		GOOD <input type="checkbox"/>	POOR <input type="checkbox"/>	FUSIBLE LINK INSTALLED	YES <input type="checkbox"/>	NO <input type="checkbox"/>	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	YES <input type="checkbox"/>	NO <input type="checkbox"/>
TXR000050930							GOOD <input type="checkbox"/>	POOR <input type="checkbox"/>	EMERGENCY CLOSING OF LID UNOBSTRUCTED	YES <input type="checkbox"/>	NO <input type="checkbox"/>	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	YES <input type="checkbox"/>	NO <input type="checkbox"/>

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)										12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT W/T/VOL	SK DOT NUMBER	5163055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.	
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1953													117		0 TO 220 LBS./MONTH	INITIALS
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993													801		220 LBS. TO 2,200 LBS./MONTH	INITIALS
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE)													950		GREATER THAN 2,200 LBS./MONTH	INITIALS
UN3267 PGIII (D006, D008, D018, D027, D039, D040) (ERG1537, 947)																INITIALS

DESIGNATED FACILITY NAME AND ADDRESS SAFETY-KLEEN SYSTEMS, INC. USA EPA ID NO. STATE ID NO.

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$
PREVIOUS CREDIT CARD NO.			
CREDIT CARD NO.		AMEX VISA MC	EXP. DATE
CUSTOMER REFERENCE			

MANIFEST NO.	44581
LDR MESSAGE	
MANIFEST CODE	5 U
SEQ #	
IN THE EVENT OF AN EMERGENCY CALL 1-800-668-1760 (24 hours)	

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Print Customer Name
By: *Bill Hattis*
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	284.00
TOTAL DUE	333.84
DO NOT WRITE IN THE AREA BELOW	
M003644581 132038	

SERVICE AND SALES ACKNOWLEDGMENT

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (if Applicable)
 NC D101779726

Document No.
 44/S

2. Page 1 of 1

3. Shipper's Name and Mailing Address
 AVDEL CHERRY TEXTRON
 614 NC 200 HWY
 STANFIELD NC 28163
 4. Shipper's Phone (704) 888-7140

5. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC
 6. US EPA ID Number TXR000050930
 A. Transporter's Phone 704 375-0098

7. Transporter 2 Company Name
 8. US EPA ID Number
 B. Transporter's Phone

9. Designated Facility Name and Site Address 050510
 CLEANLITES RECYCLING INC
 100 FINE RD
 SPARTANBURG SC 29303
 10. US EPA ID Number SCR000764969
 C. Facility's Phone 864 503-9900

11. Shipping Name and Description		12. Containers		13. Total Quantity	14. Unit W/Vol
HM		No.	Type		
a.	X ⁴ BATTERIES, WET, FILLED WITH ALKALI 8 UN2795 PG III (ERG#154) (UNIVERSAL WASTE)	001	CF	0.60	P
b.					
c.					
d.					

15. Special Handling Instruction and Additional Information
 MFST R/T#107638830 0002-8866-81
 EMERGENCY RESP 800-468-1760 (24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
 SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.
 SKDOT# A: 115942 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.
 Printed/Typed Name Signature required here if US DOT regulated Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.
 Printed/Typed Name Sign here if material is not DOT regulated Month Day Year
 BILL WATT 18 12 06

17. Transporter 1 Acknowledgement of Receipt of Materials
 Printed/Typed Name Signature Month Day Year
 Clyde Bruce Crump Clyde Bruce Crump 18 12 06

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

19. Discrepancy Indication Space

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

IN EVENT OF EMERGENCY CALL
 1-800-468-1760 (24 hours)

SHIPPER

USE OR 16A 16B

TRANSPORTER

FACILITY

USE OR 16A 16B



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

BRANCH-TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	STEVE HERTZ				M005891071
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
			SVC. P/C	PROD. P/C	
			LOCATION	TAX EXEMPTION NO.	
			303101		

2886681
Audell cherry
614 NC Hwy 700
Stanfield NC 28163

B I L L

SERVICE DATE	SALES REP NO	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
2/13/09	8655	1798	704-588-7140					

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS				CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS) (INITIAL)	CHANGE SCK DATE (Y WW)	INV. CODE	PROMO NO.	MSDS GIVEN
									CLEAN	SPENT	# OF CONT.	SK DOT							
	822			2	622.00	41.99	663.99												

TOTAL-SERVICE/PRODUCTS	622.00	41.99	663.99	CHECK APPROPRIATE BOXES	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	MACHINE CONDITION & CLEANLINESS	<input type="checkbox"/>	<input type="checkbox"/>	FUSIBLE LINK INSTALLED	<input type="checkbox"/>	<input type="checkbox"/>	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>	<input type="checkbox"/>
TXR000050930				LAMP ASSEMBLY CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	EMERGENCY CLOSING OF LID UNOBSTRUCTED	<input type="checkbox"/>	<input type="checkbox"/>	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	<input type="checkbox"/>	<input type="checkbox"/>

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5163055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 (D039)(ERG#128) 6.7 LBS/GAL				717		0 TO 220 LBS./MONTH
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 (D011 RQ) (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)				801		220 LBS. TO 2,200 LBS./MONTH
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE) UN3267 PG111 (D006, D018, D027, D039, D040) (ERG153) 7.9 #/G				14950		GREATER THAN 2,200 LBS./MONTH

DESIGNATED FACILITY NAME AND ADDRESS	SAFETY-KLEEN SYSTEMS, INC.	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
			STATE ID NO.

PAYMENT METHOD	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO	INVOICE #	AMOUNT \$	INVOICE #
			AMOUNT \$
	CREDIT CARD NO.	AMEX	EXP. DATE
		VISA	
		MC	
CUSTOMER REFERENCE			

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #
	6-11
IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)	

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Print Customer Name: SCOTTE COX

By: *Scottie Cox*
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	663.99
DO NOT WRITE IN THE AREA BELOW.	
M005891071 006800	

SERVICE AND SALES ACKNOWLEDGMENT

THIS AGREEMENT CONTINUES ON THE REVERSE SIDE

5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

BRANCH-TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK -91	SCHEDULED TERRITORY 23	REFERENCE NUMBER 0005014464 BAL. OVER 60 DAYS
			CREDIT CODE	PREVIOUS BALANCE	
CUSTOMER SEGMENT		CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C
7		214			
LOCATION			TAX EXEMPTION NO.		

CUSTOMER NO.
2 8 6 6 8 1

Handwritten notes:
TOTAL CHARGE
106.00

BILL

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
--------------	---------------	----------------------	------------------	----------	------------------------	-------------	--------------	-------------

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS		CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (Y WW)	INV. CODE	PROMO NO.	MSDS GIVEN	
									CLEAN	SPENT								
2	32110	38699		1	97.01	7.07	106.08	15	15			12						
3	32130	38699		1	97.01	7.07	106.08	15	15			12						

TOTAL-SERVICE/PRODUCTS				2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO					

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:
FLAMMABLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993	8	8	6	801	0 TO 220 LBS./MONTH
FLAMMABLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) (NOT USDOT REGULATED) (150 SOLVENT)				557	220 LBS. TO 2,200 LBS./MONTH
FLAMMABLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) (NOT USDOT REGULATED) (AQUEOUS PW SOLUTION (B. 3476)				941	GREATER THAN 2,200 LBS./MONTH

DESIGNATED FACILITY NAME AND ADDRESS SAFETY-KLEEN SYSTEMS, INC.	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.	STATE ID NO.
--	---	----------------	--------------

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	INVOICE #	AMOUNT \$	INVOICE #
			AMOUNT \$
CREDIT CARD NO.	AMEX	VISA	EXP. DATE
CUSTOMER REFERENCE INFORMATION			

MANIFEST NO.	LDR MESSAGE
MANIFEST CODE	SEQ #
	2 11
IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)	

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.	TOTAL CHARGE (FROM ABOVE)
Print Customer Name ROBERT E. MULLINS	WASTE MIN. (FROM ABOVE)
Customer's Authorized Representative	TOTAL DUE
	179.80

DO NOT WRITE IN THE AREA BELOW	0005014464
	026300

SERVICE AND SALES ACKNOWLEDGMENT
PART 1366 (Rev. 05/07)

THIS AGREEMENT CONTINUES ON THE REVERSE SIDE

54474-R5732
LOCATION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

09/12/09 PAGE: 1
07:23:32

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
DR SALES SERVICE NO.: 39903779

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000801

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LG LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 250 CADMIUM
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 67 BENZENE

-----N O T E S-----
EXP NOTICE: THIS LDR EXPIRES ON 12/31/2009


GENERATOR'S AUTHORIZED
SIGNATURE

ROBERT E. MULLINS
NAME & TITLE
(PRINTED OR TYPED)

9 1 2 1 0 9
DATE

SEQ#: 7318 LOC: 303101 TERR: 23 REF#: 39903779 SW: 0941

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER



FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER

704-375-0098 STEVE HETO 10/10/09

GENERATOR

0	0	0	2	0	8	6	6	0	8	1
---	---	---	---	---	---	---	---	---	---	---

AVDEL CHERRY LLC
514 NC 200 HWY
STANFIELO NC 28163

BILL

PREVIOUS BALANCE 0039695776
BAL OVER 60 DAYS

CUSTOMER SEGMENT CHAIN OUTER COUNTY SVC. P/C PROD. P/C

LOCATION YETAX EXEMPTION NO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
8/13/09	7918							

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS				CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	MSDS GIVEN	
									CLEAN	SPENT	# OF CONT.	SK DOT								
1	0088888	40139417	81.0000	4	81.00	-	81.00												RELEASE NO.	<input type="checkbox"/>
2	0088888	40158050	81.0000	4	324.00	-	324.00													<input type="checkbox"/>
3	0010044			1	8.00	0.00	8.00	0.00												<input type="checkbox"/>
4	00100007			1	10.83	0.00	10.83	0.00												<input type="checkbox"/>

TOTAL-SERVICE/PRODUCTS							423.83													
------------------------	--	--	--	--	--	--	--------	--	--	--	--	--	--	--	--	--	--	--	--	--

USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
					LAMP ASSEMBLY CONDITION			FUSIBLE LINK INSTALLED			LOCAL PHONE NO. STICKER AFFIXED TO MACHINE		
								EMERGENCY CLOSING OF LID UNOBSTRUCTED			SPENT SOLVENT MEETS ACCEPTANCE CRITERIA		

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:
					0 TO 220 LBS./MONTH
					INITIALS
					220 LBS. TO 2,200 LBS./MONTH
					INITIALS
					GREATER THAN 2,200 LBS./MONTH
					INITIALS

DESIGNATED FACILITY NAME AND ADDRESS	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.	STATE ID NO.
--------------------------------------	---	----------------	--------------

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE
		<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INVOICE #	AMOUNT \$	INVOICE #
		AMOUNT \$
PREVIOUS CREDIT CARD NO.	CREDIT CARD NO.	EXP. DATE
CUSTOMER REFERENCE		

MANIFEST NO.
LDR MESSAGE
LDR NOT RECD
MANIFEST CODE
SEQ #
1 1
IN THE EVENT OF AN EMERGENCY CALL
1-800-669-5740 (24 hours)

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

Print Customer Name: SCOTIE COX

By: *[Signature]*
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	423.83
DO NOT WRITE IN THE AREA BELOW	
0039695776	
0002-8866-81 - 2	

SERVICE AND SALES ACKNOWLEDGMENT

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

NC D101779726

95776

3. Shipper's Name and Mailing Address
AVDEL CHERRY LLC
614 NC 200 HWY
STANFIELD NC 28163

4. Shipper's Phone (704) 888-7140

5. Transporter 1 Company Name: **SAFETY-KLEEN SYSTEMS, INC**
 6. US EPA ID Number: **TXR000050930**
 A. Transporter's Phone: **704 375-0098**

7. Transporter 2 Company Name: _____
 8. US EPA ID Number: _____
 B. Transporter's Phone: _____

9. Designated Facility Name and Site Address: **000630 SAFETY-KLEEN SYSTEMS, INC. 130-A FRONTAGE ROAD LEXINGTON, SC 29073**
 10. US EPA ID Number: **SCD077995488**
 C. Facility's Phone: **803 356-4061**

11. Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. NON-REGULATED LIQUID	4	OF	1400	P
b. USED OIL AND ABSORBENT MIXTURE (NOT USDOT HAZARDOUS MATERIAL)	1	OF	300	P
c. _____	_____	_____	_____	_____
d. _____	_____	_____	_____	_____

15. Special Handling Instruction and Additional Information

MFST R/T#110836079 0002-8866-81

EMERGENCY RESP 800-468-1760(24 HR). A) NONE B) NONE

SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 23136 B: 1003 C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name: _____ Signature required here if US DOT regulated: _____ Month Day Year: _____

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to Federal regulations for Transportation or Disposal.

Printed/Typed Name: **SCOTTIE COX** Sign here if material is not DOT regulated: *Scottie Cox* Month Day Year: **10/31/09**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: **MICHAEL KIBRNAW** Signature: *Michael Kibrnaw* Month Day Year: **10/31/09**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: _____ Signature: _____ Month Day Year: _____

19. Discrepancy Indication Space

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

Printed/Typed Name: _____ Signature: _____ Month Day Year: _____

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

SHIPPER USE OR 16B

USE OR 16B

FACILITY

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NBR
0039356006
SRVC WEEK: 09-29
SRVC DATE: 07/17/09 12:22
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
52000 COMS MODEL 52 W/105 RECYCLE S/N 78699 CLEAN 15 SPENT 13 SERVICE TERM 12	1	99.0000	6.68	105.68
52000 COMS MODEL 52 W/105 RECYCLE S/N 88699 CLEAN 15 SPENT 13 SERVICE TERM 12	1	99.0000	6.68	105.68
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100001 FEE, FUEL SURCHARGE	1	10.8300	0.73	11.56
TOTAL SERVICE/PRODUCTS		216.8300	14.09	230.92

USEPA TRANSPORTER 1 TXR000050930
USEPA TRANSPORTER 2
FORM CODE PP

GENERATOR USEPA NCD101779726
GENERATOR STATE

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NAI993 PGIII
RQ(D001)
D018, D039, D040 ERG#128
TOTAL CONT 2 TYPE DM TTL QTY 26 UNIT WT/VOL G SKDOT 801
CNT# 90620014582 QTY 13
CNT# 90620014583 QTY 13

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE
CHARLOTTE, NC 28205

USEPA ID NO NCD079060059	TOTAL CHARGE	230.92
STATE ID NO	WASTE MIN	0.00
	TOTAL DUE	230.92

UNPAID BALANCE THIS RECEIPT 230.92

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
0 - 220 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

X *Scott Co*

SIGNATURE NAME: SCOTT

www.safety-kleen.com // Safety-Kleen. // www.safety-kleen.com // www.safety-kleen.com // www.safety-kleen.com

K54474-R5732
LOCATION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

05/20/09 PAGE: 1
09:50:55

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 39356006

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000801

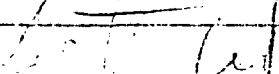

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LQ LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 250 CADMIUM
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 67 BENZENE

----- N O T I C E -----
EXP NOTICE: THIS LDR EXPIRES ON 12/31/2009

		7.11.09
GENERATOR'S AUTHORIZED SIGNATURE	NAME & TITLE (PRINTED OR TYPED)	DATE

SEG#: 7496 LOC: 303101 TERR: 23 REF#: 39356006 SW: 0929
TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

SAFETY-KLEEN
NOTIFICATION FORM
MANIFEST
OR SALES SERVICE

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NBR
0038805837

SRVC WEEK: 09-17
SRVC DATE: 04/21/09 14:46
NC 28163

TAX EXEMPTION NBR:

NOTIFY THAT THIS IS
LAND DISPOSAL RES
NOTIFICATION
LINE# 01/001 SK P

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
52000 COMS MODEL 52 W/105 RECYCLE S/N 88699 CLEAN 15 SPENT 14 SERVICE TERM 12	1	99.0000	6.68	105.68
52000 COMS MODEL 52 W/105 RECYCLE S/N 78699 CLEAN 15 SPENT 14 SERVICE TERM 12	1	99.0000	6.68	105.68
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100001 FEE, FUEL SURCHARGE	1	8.9000	0.60	9.50
TOTAL SERVICE/PRODUCTS		214.9000	13.96	228.86

ANY)
10% TOC

USEPA TRANSPORTER 1 TXR000050930
USEPA TRANSPORTER 2
FORM CODE PP

GENERATOR USEPA NCD101779726
GENERATOR STATE

FROM
FROM

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PGIII
RQ(D001)
0018,0039,0040 ERG#128
TOTAL CONT 2 TYPE DM TTL QTY 28 UNIT WT/VOL G SKDOT 801
CNT# 90328015606 QTY 14
CNT# 90328015607 QTY 14

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE
CHARLOTTE, NC 28205

USEPA ID NO NCD079060059
STATE ID NO

TOTAL CHARGE 228.86
WASTE MIN 0.00
TOTAL DUE 228.86

UNPAID BALANCE THIS RECEIPT 228.86

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
0 - 220 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

www.safety-kleen.com // Safety-Kleen. // www.safety-kleen.com

Robert F. Mullins
SIGNATURE NAME: ROBERT MULLINS

E 5
19

11/15
TITLE
(TYPED)

TERR: 23

474-R5732
TION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

03/28/09 PAGE: 1
15:08:45

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 38805837

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000801

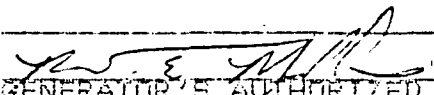
EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 Lq LIQUID >= 10% TOC
D018
D037
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:
100 O-CRESOL
101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM
P-CRESOL)
102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM
M-CRESOL)
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
250 CADMIUM
255 LEAD
257 MERCURY - ALL OTHERS
67 BENZENE

----- N O T E S -----

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2009

 Robert Mullins 4 / 21 / 09
GENERATOR'S AUTHORIZED NAME & TITLE DATE
SIGNATURE (PRINTED OR TYPED)

SEG#: 7436 LOC: 303101 TERR: 23 REF#: 38805837 SW: 0917
TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

BRANCH-TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
------------------	----------------	-----------	------------------------	---------------------	------------------

104-375-0096 STAFF HEAD

CREDIT CODE PREVIOUS BALANCE 9005586713 BAL. OVER 60 DAYS

CUSTOMER SEGMENT CHAIN OUTER COUNTY SVC. P/C PROD. I
S-47 714

LOCATION TAX EXEMPTION NO.

CUSTOMER

7 8 8 6 6 8 1

BILL TO

Michael Cherry
614 NC 200 Hwy
Stanfield NC 28163

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
7/18/09	8659	7M211757	704-388-1140					

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS) (INITIAL)	CHANGE SCH. DATE (YY WW)	RV. CODE	PROMO NO.	
									CLEAN	SPENT	# OF CONT.							SK DOT
1																		
2	822			2	622.00	41.99	663.99											
3																		
4																		
5																		
6																		
7																		
8																		
9																		
10																		
11																		
12																		

TOTAL-SERVICE/PRODUCTS	CHECK APPROPRIATE BOXES	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	MACHINE CONDITION & CLEANLINESS	<input type="checkbox"/>	<input type="checkbox"/>	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>	<input type="checkbox"/>
				LAMP ASSEMBLY CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	<input type="checkbox"/>	<input type="checkbox"/>

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	1. CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 6.111 (D039) (ERG#128) 6.7 LBS/GAL					0 TO 220 LBS/MONTH
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 6.111 RQ (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)				801	220 LBS. TO 2,200 LBS/MONTH
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE) UN3267 PG111 (D006, D018, D037, D039, D040) (ERG153) 7.9#/G				14950	GREATER THAN 2,200 LBS/MONTH

DESIGNATED FACILITY NAME AND ADDRESS	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
SAFETY-KLEEN SYSTEMS, INC.		STATE ID NO.

PAYMENT RECEIVED	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	INVOICE #	AMOUNT \$	INVOICE #
			AMOUNT \$
	CREDIT CARD NO.	AMEX VISA MC	EXP. DATE
CUSTOMER REFERENCE			

MANIFEST NO.
LDR MESSAGE
MANIFEST CODE
SEQ #
IN THE EVENT OF AN EMERGENCY CALL

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

Print Customer Name: SCOTTIE COX

By: [Signature]

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	663.99
DO NOT WRITE IN THE AREA BELOW	
M005586713	

SERVICE AND SALES ACKNOWLEDGMENT

www.safety-kleen.com

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

NC CSG# 23, Tues
05:37 PM Departure Time

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCE TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER# V201479

REFERENCE NBR 0038222598
SRVC WEEK: 09-05
SRVC DATE: 01/26/09 10:35
NC 28163

TAX EXEMPTION NBR:

581

Status: N/A
ID: NCD1
Required: No
Ess Type: 9
Per:

PRODUCT/SERVICES

SERVICE/PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
88888 875480 LANDF NON USDOT HAZM	3	81.0000	0.00	243.00
S/N 40158050 CLEAN O SPENT O				
SERVICE TERM 24				
88888 875480 LANDF NON USDOT HAZM	3	81.0000	0.00	243.00
S/N 40139417 CLEAN O SPENT O				
SERVICE TERM 24				
10044 EXTENDED SERVICE AREA FEE	0	0.0000	0.00	0.00
100007 FEE, FUEL SURCHARGE NON TAX	0	0.0000	0.00	0.00
TOTAL SERVICE/PRODUCTS		486.0000	0.00	486.00

USEPA TRANSPORTER 1 TXR000050930 GENERATOR USEPA NC0101779726
USEPA TRANSPORTER 2 GENERATOR STATE
MANIFEST DOC # 22598 FORM CODE BL SK TRACKING # 110285583

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)

USED OIL AND ABSORBENT MIXTURE (NOT USDOT HAZARDOUS MATERIAL)

TOTAL CONT 3	TYPE DM	TTL QTY 675	UNIT WT/VOL P	SKDOT 1003
CNT# 90123011646	QTY 225	PROF 40139417		
CNT# 90123011647	QTY 225	PROF 40139417		
CNT# 90123011648	QTY 225	PROF 40139417		

NON-REGULATED LIQUID

TOTAL CONT 3	TYPE DM	TTL QTY 600	UNIT WT/VOL P	SKDOT 23136
CNT# 90123011643	QTY 200	PROF 40158050		
CNT# 90123011644	QTY 200	PROF 40158050		
CNT# 90123011645	QTY 200	PROF 40158050		

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

USEPA ID NO SCD077995488	TOTAL CHARGE	486.00
STATE ID NO	WASTE MIN	0.00
	TOTAL DUE	486.00

UNPAID BALANCE THIS RECEIPT 486.00

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
220 - 2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

8

748

2598

12

DOC # 225
MANF # 0007

003
13/10
3480-55G

01003
1/23/10
375480-55G

001003
1/23/10
0875480-55G

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- 2008-8
- 2008-50 2008-46 20
- 2008-45
- 2008-31 2008-13
- 2008-32 2008-9
- 2008-29 2008-9
- 2008-7
- 2008-50 2008-46 20
- 2008-32 2008-29 20

Michael Kiernan

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of

22598

3. Shipper's Name and Mailing Address

NC D101779726
 AVDEL CHERRY LLC
 614 NC 200 HWY

4. Shipper's Phone ()

STANFIELD NC 28163
 (704) 848-7140

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

SAFETY-KLEEN SYSTEMS, INC.

TXR000009330

704 375-0098

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

000630
 SAFETY-KLEEN SYSTEMS, INC.
 130-A FRONTAGE ROAD
 LEXINGTON, SC 29073

SCD077995488

803 356-4061

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

HM	No.	Type	Quantity	Unit Wt/Vol
a.				
	3	DM	600	P
b.				
	3	DM	675	P
c.				
d.				

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760 (24 HR). A) NONE B) NONE
 SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.
 SKDOT# A: 23136 B: 1003 C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

LARRY GRASO

Signature: [Signature] 11/26/09

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

MICHAEL KIBRANU

Signature: [Signature] 01/26/09

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

SHIPPER

USE

16A OR 16B

FACILITY

USE

16A OR 16B

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER# V201479

REFERENCE NBR 0038222599
SRVC WEEK: 09-05
SRVC DATE: 01/26/09 09:38
NC 28163

TAX EXEMPTION NBR:

Status: N/A
D: NCD10
Required: No
Ass Type: 9

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
3230 TAX HANDLING N/C DRUM DROP	0	0.0000	0.00	0.00
52000 COMS MODEL 52 W/105 RECYCLE	1	99.0000	6.68	105.68
S/N 88699 CLEAN 15 SPENT 13				
SERVICE TERM 12				
52000 COMS MODEL 52 W/105 RECYCLE	1	99.0000	6.68	105.68
S/N 78699 CLEAN 15 SPENT 13				
SERVICE TERM 12				
22555 OIL SERVICE (02022555)	1	0.0000	0.00	0.00
CAUSE CODE V				
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100001 FEE, FUEL SURCHARGE	1	10.1800	0.69	10.87
TOTAL SERVICE/PRODUCTS				230.23

USEPA TRANSPORTER 1 TXK000050930
USEPA TRANSPORTER 2
FORM CODE PP

GENERATOR USEPA NCD101779726
GENERATOR STATE

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PGIII
RQ(D001)

D018, D039, D040 ERG#128
TOTAL CONT 2 * TYPE DM TTL QTY 26 UNIT WT/VOL G SKDOT 801
CNT# 90103016460 QTY 13
CNT# 90103016461 QTY 13

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE
CHARLOTTE, NC 28205

USEPA ID NO NCD079060059
STATE ID NO

TOTAL CHARGE 230.23
WASTE MIN 0.00
TOTAL DUE 230.23

UNPAID BALANCE THIS RECEIPT 230.23

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
220 - 2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)



www.safety-kleen.com

Asset Tag #	Qty	AMB	Unit Price
1 N			\$0.00
1 N			\$99.00
1 N			\$99.00
1 N			\$0.00
1 N			\$8.00
1 N			\$10.00

Labels 5 Legal Backer Not Needed

Customer Serv

* BLANKET# V201479

Customer's W:

Date	SKDOT#
12/11/2008	704
11/11/2008	801
11/03/2008	1001

Allied Product

Year-Weeks
2008-46 2008-36 2008-
2008-32 2008-8
2008-29
2008-32 2008-29 2008
2008-8
2008-50 2008-46 2008
2008-45
2008-31 2008-13
2008-32 2008-9
2008-29 2008-9
2008-7
2008-50 2008-46 2008
2008-32 2008-29 2008

K54474-R5732
LOCATION: 303101.

SAFETY-KLEEN
LDR NOTIFICATION FORM

01/03/09 PAGE: 1
07:28:24

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 38222599

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000801

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LG LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:
100 O-CRESOL
101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM
F-CRESOL)
102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM
M-CRESOL)
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
250 CADMIUM
255 LEAD
257 MERCURY - ALL OTHERS
67 BENZENE

-----N O T E S-----
EXP NOTICE: THIS LDR EXPIRES ON 12/31/2009

GENERATOR'S AUTHORIZED SIGNATURE NAME & TITLE (PRINTED OR TYPED) DATE

SEQ#: 7916 LOC: 303101 TERR: 23 REF#: 38222599 SW: 0905
TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

NC CSG# 23,
:02:48 AM Departu

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#
REFERENCE 003788/471
SRVC WEEK: 08-50
SRVC DATE: 12/11/08 10:19
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
50000 COMS MDL 50 W/105 RECYCLED S/N 68699 CLEAN 5 SPENT 6	1	77.0000	5.20	82.20
SERVICE TERM 52				
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100001 FEE, FUEL SURCHARGE	1	12.1500	0.82	12.97
TOTAL SERVICE/PRODUCTS		97.1500	6.02	103.17

USEPA TRANSPORTER 1 IN 000050930 GENERATOR USEPA NCD101/79726
USEPA TRANSPORTER 2 GENERATOR STATE
FORM CODE PP

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PGIII
(D001, D018, D039, D040) (ERG#128)
TOTAL CONT 1 TYPE DF TTL QTY 6 UNIT WT/VOL G SKDOT 704
CNT# 81115018254 QTY 6

681
it Status:
ID:
required:
ress Type
ber:

HNOLOGIES

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE
CHARLOTTE, NC 28205

USEPA ID NO NCD0/9060059 TOTAL CHARGE 103.17
STATE ID NO WASTE MIN 0.08
TOTAL DUE 103.17

asset Tag # Qty AMB U:
1 N
1 N
1 N

Labels Legi
1 Not

UNPAID BALANCE THIS RECEIPT 103.17

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
0 - 220 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

Custom

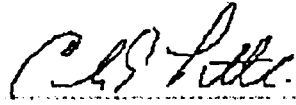
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Custom

Date
11/11/200
11/03/200
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Yea
2008-46 21
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2008-32 21
2008-8
2008-46 2
2008-45
2008-31 2
2008-32 2
2008-29 2
2008-7
2008-46 2
2008-32 2



SIGNATURE NAME: CHRIS

LAST PAGE

/PrintRouteWi

www.safety-kleen.com

K54474-R5732
LOCATION: /303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

11/15/08 PAGE: 1
16:01:24

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 37887473

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000704

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LG LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

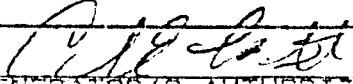
WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 240 2,4,6-TRICHLOROPHENOL
- 248 BARIUM
- 250 CADMIUM
- 251 CHROMIUM (TOTAL)
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 260 SILVER
- 67 BENZENE
- 91 CHLOROFORM

Handwritten signature and date: 11/15/08

NOTES

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2008

	<u>Chris Little</u>	<u>12 / 11 / 2008</u>
GENERATOR'S AUTHORIZED SIGNATURE	NAME & TITLE (PRINTED OR TYPED)	DATE

SEQ#: 8233 LOC: 303101 TERR: 23 REF#: 37887473 SW: 0850

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE N
0037687909

SRVC WEEK: 08-46
SRVC DATE: 11/11/08 12:
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
52000 COMS MODEL 52 W/10S RECYCLE S/N 88699 CLEAN 15 SPENT 9 SERVICE TERM 12	1	99.0000	6.68	105.68
52000 COMS MODEL 52 W/10S RECYCLE S/N 78699 CLEAN 15 SPENT 15 SERVICE TERM 12	1	99.0000	6.68	105.68
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100001 FEE, FUEL SURCHARGE	1	15.1300	1.02	16.15
822 DEGREASER, HEAVY DUTY SSGL	1	311.0000	20.99	331.99
TOTAL SERVICE/PRODUCTS		512.1300	35.37	567.50

USEPA TRANSPORTER 1 IXR000050930
USEPA TRANSPORTER 2
FORM CODE PP

GENERATOR USEPA NCD101779726
GENERATOR STATE

US DOI DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PGIII
RQ(D001)

DO18, D039, D040 ERG#128
TOTAL CONT 2 TYPE DM TTL QTY 24 UNIT WT/VOL G SKDOT 801
CNT# 81018017798 QTY 9
CNT# 81018017799 QTY 15

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE
CHARLOTTE, NC 28205

USEPA ID NO NCD079060059
STATE ID NO

TOTAL CHARGE 567.50
WASTE MIN 0.00
TOTAL DUE 567.50

UNPAID BALANCE THIS RECEIPT 567.50

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS
220 - 2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

NC CSG# 23, Wednesd
5:03:25 PM Departure Time:

681

it Status: N/A
ID: NCD101
equipped: No
less Type
Der: 9

TECHNOLOGIES
Serv
Prod

Asset Tag #	Qty	AMB	Unit Price
	1	N	\$99.00 \$
	1	N	\$99.00 \$
	1	N	\$8.00
	1	N	\$15.13 \$

Labels 2
Legal Backer Not Needed

Customer Service

* BLANKET# V201479W

Customer's Was

Date	SKDOT#
08/08/2008	25383
08/08/2008	23136
08/08/2008	11130
08/08/2008	801
08/01/2008	12700
07/18/2008	167907
07/18/2008	23136
07/18/2008	11130
07/18/2008	1003

Allied Products

Year-Weeks
2008-36 2008-29 2008-15
2008-32 2008-8
2008-29
2008-32 2008-29 2008-9
2008-8
2008-32 2008-29 2008-24
2008-31 2008-13 2007-51
2008-32 2008-9
2008-29 2008-9
2008-7
2008-32 2008-31 2008-21

www.safety-kleen.com

4-R5732
ION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

10/18/08 PAGE: 1
07:32:40

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 37687909

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 269.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000801

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LG LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 240 2,4,6-TRICHLOROPHENOL
- 248 BARIUM
- 250 CADMIUM
- 251 CHROMIUM (TOTAL)
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 260 SILVER
- 67 BENZENE
- 91 CHLOROFORM

NOTES

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2008

[Signature]
GENERATOR'S AUTHORIZED
SIGNATURE

LARRY GLEASON
NAME & TITLE
(PRINTED OR TYPED)

11/11/08
DATE

SEQ#: 8405 LOC: 303101 TERR: 23 REF#: 37687909 SW: 0846

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

BRANCH-TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0088	STEVE HEATH		08		MO05105792
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
			SVC. P/C	PROD. P/C	
			LOCATION	TAX EXEMPTION NO.	
			303101		

0002-8866-81

AUDOL CHERRY
684 HWY 200
STANFORD, NC

BILL

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
9/3/08	00791	7M211757						

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS				CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS/INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	MSD/GENE
									CLEAN	SPENT	# OF CONT.	SK DOT							
1	822	SS WACABP128		2	686.00	46.30	732.30												

TOTAL SERVICE/PRODUCTS	6663.99	732.30																	
------------------------	---------	--------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	CHECK APPROPRIATE BOXES	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
TXR000050930				MACHINE CONDITION & CLEANLINESS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>	<input type="checkbox"/>
11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)				12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.				
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993							717	0 TO 220 LBS./MONTH				
PG III (D039) (ERG#128) 6.7 LBS/GAL							801	INITIALS				
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993							11268	220 LBS. TO 2,200 LBS./MONTH				
PG III RC (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)								INITIALS				
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE)								GREATER THAN 2,200 LBS./MONTH				
8 UN3267PGIII (D018, D027, D039, D040) (ERG#153)								INITIALS				

DESIGNATED FACILITY NAME AND ADDRESS	SAFETY-KLEEN SYSTEMS, INC.	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
			STATE ID NO.

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE
		<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INVOICE #	AMOUNT \$	INVOICE #
		AMOUNT \$
PREVIOUS CREDIT CARD NO.		
CREDIT CARD NO.	AMEX	EXP. DATE
	VISA	
	MC	
CUSTOMER REFERENCE INFORMATION		

MANIFEST NO.
LDR MESSAGE
MANIFEST CODE
SEQ #
18 D
IN THE EVENT OF AN EMERGENCY CALL
1-800-468-1760 (24 hours)

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.
Print Customer Name
By: Rick Clayton
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	732.30
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	732.30
DO NOT WRITE IN THE AREA BELOW	
MO05105792	
007918	

SERVICE AND SALES ACKNOWLEDGMENT



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com

PLACEMENT FORM

28 8 6 6 8 51

FOR SERVICE CALL	BRANCH MANAGER	REFERENCE NUMBER
704-375-0098	STEVE HETU	POO1911802

DUNS NO. 05-397-6551 FED. ID NO. 396090019

GENERATOR LOCATION

Acdel Cherry

BILL TO (IF DIFFERENT FROM LOCATION)

NAME	TITLE	SIGN
1.		
2.		

LOCATION	SIC CODE			
303101				
CUSTOMER SEGMENT	CHAIN	ASSOCIATION	SVC. P/C	PROD. P/C
I4				
SALES TAX EXEMPTION NUMBER				

NAME	NAME
NEW PLACEMENT	
DELIVERY ADDRESS	DELIVERY ADDRESS
614 No 200 No	
INFORMATION/ATTENTION LINE	INFORMATION/ATTENTION LINE
CITY & STATE	CITY & STATE
STANFIELD NC	
ZIP	ZIP
28163	
TAX CODE	TAX CODE

DATE PLACED	SALES REP NO.	<input type="checkbox"/> BLANKET	<input type="checkbox"/> TEMPORARY	CUSTOMER PHONE NO.	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
1-08	430778			704-888-7140		6.75	6.75	6.75

LEFT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN	CHARGE	SALES TAX	TOTAL CHARGE	SOLVENT/DRUMS		CC	SERVICE TERM	SCHEDULE RATE (Y/W/W)	PLUM CODE (SEE BELOW)	FREE TRIAL	INV. CODE	PROMO NO.	RELEASE NO.
								CLEAN	SPENT								
1	88888	3225276	Proqual	1			Nil				52						
2		874875															

TOTAL-SERVICE/PRODUCTS	REFUSED SERVICE EXPLAIN	PLACEMENT CODES
	Nil	(1) NEW APPLICATION (2) REPLACE DEFECTIVE MACHINE (3) REPLACE COMPETITIVE MACHINE (4) REPLACE HOME MADE VAT (5) ADDITIONAL MACHINE

USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
TXR000050930			

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	INITIALS
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PG III (D039)(ERG#128) 6.7LBS/GAL				717	5163055
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PG III RQ (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)				801	
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE) UN3267PGIII (D018, D027, D039, D040) (ERG#153)				11268	

DESIGNATED FACILITY NAME AND ADDRESS	USA EPA ID NO.
SAFETY-KLEEN SYSTEMS, INC.	STATE ID NO.

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE
INVOICE #	AMOUNT \$	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.		
CREDIT CARD NO.	AMEX	EXP. DATE
	VISA	
	MC	
CUSTOMER REFERENCE		

MANIFEST NO.	
LDR MESSAGE	
MANIFEST CODE	SEQ #
	4 D
IN THE EVENT OF AN EMERGENCY CALL	

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

See Signature for Signature
Print Customer Name

By: _____
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
TOTAL DUE	Nil
DO NOT WRITE IN AREA BELOW	
P001911802	
430778	



5400 Legacy Drive, Cluster II, B3
 Plano, Texas 75024
 800-669-5740
 www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

BHANCH - TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	STEVE HETU		08-20		M004801735
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
			1A	214	
			LOCATION		TAX EXEMPTION NO.
			303101		

GENERATOR

2 8 8 6 6 8 1

*Arden Cherry LLC
 614 NC 200 Hwy
 Stamford, NC 28163*

B I L L

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
5-05-08	430778	711211757	704-888-7140		PW	6.75	6.75	6.75

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	CHANGE SOL. DATE (YR W/W)	INV. CODE	PROMO NO.	MSDS GIVEN
									CLEAN	SPENT	# OF CONT.							
			<i>Increased 55 gal @ 295.00</i>	2	590.00	39.85	629.85											

TOTAL SERVICE/PRODUCTS	629.85	CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	GOOD <input type="checkbox"/>	POOR <input type="checkbox"/>	DECALS IN PLACE AND LEGIBLE	YES <input type="checkbox"/>	NO <input type="checkbox"/>	MACHINE PROPERLY GROUNDED	YES <input type="checkbox"/>	NO <input type="checkbox"/>
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	LAMP ASSEMBLY CONDITION	EMERGENCY CLOSING OF LID UNOBSTRUCTED	FUSIBLE LINK INSTALLED	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA			

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5163055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES: 0 TO 220 LBS./MONTH 220 LBS. TO 2,200 LBS./MONTH GREATER THAN 2,200 LBS./MONTH
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PG III (D039)(ERG#128) 6.7LBS/GAL				717		
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PG III RQ (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)				801		
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE) PG III (D018, D027, D039, D040) (ERG#153)				11268		

DESIGNATED FACILITY NAME AND ADDRESS	SAFETY-KLEEN SYSTEMS, INC.	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
			STATE ID NO.

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	INVOICE #	AMOUNT \$	INVOICE #
			AMOUNT \$
	CREDIT CARD NO.	AMEX VISA MC	EXP. DATE
CUSTOMER REFERENCE INFORMATION			

MANIFEST NO.	LDR MESSAGE
MANIFEST CODE	SEQ #
	10 D
IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)	

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Print Customer Name _____
 By: _____
 Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	629.85
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	629.85
DO NOT WRITE IN THE AREA BELOW	
M004801735 430778	

SERVICE AND SALES ACKNOWLEDGMENT PART 01-1366 (Rev. 05/07)

Safety-Kleen

6400 Legacy Dr.
Cluster 11, Building 3
Plano, Texas 75024
704-375-0098

REFERENCE NBR
0036444715

CUSTOMER# 2886681 AVDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

SHVC WEEK: 08-21
SRVC DATE: 05/20/08 15:37
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

SERVICE / PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
10044 EXTENDED SERVICE AREA FEE	1	8.0000	0.00	8.00
100001 FEE, FUEL SURCHARGE	1	17.1100	1.15	18.26
52000 COMS MODEL 52 W/105 R/CYCLE	1	99.0000	6.68	105.68
S/N 88699 CLEAN 15 SPENT 13				
SERVICE TERM 12				
52000 COMS MODEL 52 W/105 R/CYCLE	1	99.0000	6.68	105.68
S/N 78699 CLEAN 15 SPENT 13				
SERVICE TERM 12				
TOTAL SERVICE/PRODUCTS		223.1100	14.51	237.62

USEPA TRANSPORTER 1 TXR000050930
USEPA TRANSPORTER 2
FORM CODE DP

GENERATOR ID NCD10177926
GENERATOR STATE

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE: COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PG111
RQ(D001)

D018, D039, D040 ERG#128
TOTAL CONT 2 TYPE UM TIL QTY 26 UNIT WT/VOL G SKOUT 801
CNT# 80426012840 QTY 13
CNT# 80426012841 QTY 13

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 VADKIN AVE

CHARLOTTE, NC 28205

USEPA ID NO NCD079060059
STATE ID NO

TOTAL CHARGE	237.62
WASTE MIN	0.00
TOTAL DUE	237.62

UNPAID BALANCE THIS RECEIPT 237.62

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 220 - 2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer.

The following provision is applicable to Safety Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution.

IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

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www.safety-kleen.com // Safety-Kleen. // MAN: SALES SER
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01/001
TOC
www.safety-kleen.com // Safety-Kleen. // ED)
TERR:
LITY

3200 21/11

AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 36444775

CUST#: 0002-8866-81

IN ACCORDANCE WITH 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

DR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000801

HAZARDOUS WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LG LIQUID >= 10% TOC
D018
D039
D040

REATABILITY GROUP: NONWASTEWATERS

HAZARDOUS WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 240 2,4,6-TRICHLOROPHENOL
- 248 BARIUM
- 250 CADMIUM
- 251 CHROMIUM (TOTAL)
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 260 SILVER
- 57 BENZENE
- 71 CHLOROFORM

NOTES

NOTICE: THIS LDR EXPIRES ON 12/31/2008

[Signature]
GENERATOR'S AUTHORIZED
SIGNATURE

Bill Waters
NAME & TITLE
(PRINTED OR TYPED)

5, 20, 08
DATE

7697 LOC: 303101

TERR: 23 REF#: 36444775 SW: 0821

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TOWNSHIP

5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551

FED. ID NO. 396090019

BRANCH-TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	STEVE HETU	07/05/08	19	23	0036506472
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
			SVC. FC	PROD. P/C	
			LOCATION	YES	TAX EXEMPTION NO.

CUSTOMER INFORMATION

B I L L

AVDEL CHERRY LLC
614 NC 200 HWY
STANFIELD NC 28163

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
5/6/08	3436	7M211757						

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	RELEASE NO.	MSD: GIVE	
									CLEAN	SPENT	# OF CONT.									SK DOT
1	0088838	40158050	76.0000	6	456.00		456.00							12						
2	0010044			1	8.00	0.00	8.00	0.00						0						
3	00100007			1	7.88	0.00	7.88	0.00						0						

TOTAL-SERVICE/PRODUCTS	471.88	CHECK APPROPRIATE BOXES	MACHINE CONDITION & CLEANLINESS	<input type="checkbox"/>	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	<input type="checkbox"/>	YES	NO	MACHINE PROPERLY GROUNDED	<input type="checkbox"/>	YES	NO
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	LAMP ASSEMBLY CONDITION	<input type="checkbox"/>	FUSIBLE LINK INSTALLED	<input type="checkbox"/>	EMERGENCY CLOSING OF LID UNOBSTRUCTED	<input type="checkbox"/>	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	<input type="checkbox"/>	

TXR000050930	NCD101779726	11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5163055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:
See Bill of Lading							0 TO 220 LBS./MONTH	
							220 LBS. TO 2200 LBS./MONTH	
							GREATER THAN 2,200 LBS./MONTH	

DESIGNATED FACILITY NAME AND ADDRESS	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.	STATE ID NO.
--------------------------------------	---	----------------	--------------

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER			<input type="checkbox"/> TODAY'S SERVICE/SALE
INVOICE #	AMOUNT \$	INVOICE #	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	EXPTRED	CREDIT CARD NO.	EXP. DATE
AMEX VISA MC			

MANIFEST NO.	06472
LDR MESSAGE	LDR NOT REQ'D
MANIFEST CODE	SEQ #
	1 D

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.	Print Customer Name
<i>LARRY GLEASON</i>	
By: <i>[Signature]</i>	Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	WASTE MIN. (FROM ABOVE)	TOTAL DUE
		471.88
DO NOT WRITE IN THE AREA BELOW		
0036506472		
0002-8866-81 -2		

SERVICE AND SALES ACKNOWLEDGMENT

IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable) **NC D101779526** Document No. **0647** 2. Page 1 of 1

3. Shipper's Name and Mailing Address **AVDEL CHERRY LLC**
614 NC 200 HWY
STANFIELD NC 28163

4. Shipper's Phone (**704 888-7140**)

5. Transporter 1 Company Name **SAFETY-KLEEN SYSTEMS, INC** 6. US EPA ID Number **TXR000050530** A. Transporter's Phone **704 375-0098**
 7. Transporter 2 Company Name _____ 8. US EPA ID Number _____ B. Transporter's Phone _____

9. Designated Facility Name and Site Address **SAFETY-KLEEN SYSTEMS, INC.** 10. US EPA ID Number **SCD077995488** C. Facility's Phone **803 356-4061**
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

11. Shipping Name and Description		12. Containers		13. Total Quantity	14. Unit Wt/Vol
HM		No.	Type		
a.	NON-REGULATED LIQUID	106	DM	2400	P
b.					
c.					
d.					

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760(24 HR). A) NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

MFST R/T#109524950 0002-8866-81

SKDOT# A: 23136 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name _____ Signature required here if US DOT regulated _____ Month Day Year _____

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name **LARRY GLEASON** Sign here if material is not DOT regulated _____ Month Day Year **05 06 08**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Kevin L. Mullis** Signature _____ Month Day Year **05 06 08**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name _____ Signature _____ Month Day Year _____

19. Discrepancy Indication Space

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

Printed/Typed Name _____ Signature _____ Month Day Year _____

SHIPPER

USE OR 16B

AGRICULTURAL CHEMICALS (Pesticides)

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375 0098

REFERENCE NBR

0035415073

CUSTOMER# 2806681 AVIATEC ENERGY LLC
SERVICE TAX: 0.06750 614 NC 2001 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER# V201479

SVC W/LK 03 09
SVC DATE: 02/26/08 15:11
NC 28163

TAX EXEMPTION NBR:

ENC CSG# 2
10:20 AM Depart

PRODUCT / SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
10044 EXTENDED SERVICE AREA FEE	0	0.0000	0.00	0.00
100001 FEE, FUEL SURCHARGE	0	0.0000	0.00	0.00
52000 COMS MODEL 52 W/105 RECYCLE	1	94.0000	6.35	100.35
S/N 88699 CLEAN 15 SPENT 13				
SERVICE TERM 12				
52000 COMS MODEL 52 W/105 RECYCLE	1	94.0000	6.35	100.35
S/N 78699 CLEAN 15 SPENT 13				
SERVICE TERM 12				
TOTAL SERVICE/PRODUCTS		188.0000	12.70	200.70

681

Status:

D:

quired:

ss Type

r:

NOLOGIES

USEPA TRANSPORTER # 120000050930
USEPA TRANSPORTER 2 2
FORM CODE OP

GENERATOR ID NC110173/26
GENERATOR STATE

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.D.S.
(PETROLEUM NAPHTHA) NA1993 PG111
RQ(D001)

(D018, D039, D040) ERG#128

TOTAL CONT 2 TYPE UM III QTY 26 UNIT W/ VOL. G SKIIXI 801

CNT# 80202013106 QTY 13

CNT# 80202013107 QTY 13

set Tag# Qty AMB I

1 N

1 N

1 N

1 N

DESIGNATED FACILITY NAME / ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YACKIN AVE

CHARLOTTE, NC 28205

USEPA ID NO NC110173/060059
STATE ID NO

TOTAL CHARGE 200.70
WASTE MIN 0.00

TOTAL DUE 200.70

als

Legal B
Not Net

Customer

* BLANKET# V

UNPAID BALANCE THIS RECEIPT 200.70

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 220 - 2200 lbs/month

Customer's

Date SK
02/11/2008 14
12/21/2007 23
12/05/2007 23
12/05/2007 80

Customer certifies that (i) the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received solution, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgment is duly authorized to sign and bind Customer. The following provision is applicable to Safety Kleen's parts cleaner and paint gun cleaner services. Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCBs), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution.

IN THE EVENT OF AN EMERGENCY CALL 1 800 468 1760 (24 hours)

Allied Prod

Year-Week

2007-26 2007-18
2007-12
2007-18
2007-34 2007-18 2
2007-18
2007-49 2007-42 2
2007-51 2007-19
2007-36
2007-36
2007-12
2007-18
2007-34 2007-12
2007-51 2007-49 20
2007-49 2007-42

Handwritten signature

www.safety-kleen.com

54474-R5732
LOCATION: 303101

SAFETY-KLE
LDR NOTIFICATION FORM

02/02/08 PAGE: 1
07:45:37

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR LDR SERVICE NO.: 35915073

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000801

HAP WASTE CODES & LDR SUBCATEGORIES (IF ANY)
D001 LG LIQUID >= 10%
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 240 2,4,6-TRICHLOROPHENOL
- 248 BARIUM
- 250 CADMIUM
- 251 CHROMIUM (TOTAL)
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 260 SILVER
- 67 BENZENE
- 91 CHLOROFORM

NOTES

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2008

[Signature]
GENERATOR'S AUTHORIZED
SIGNATURE

SCOTTIE W. COX
NAME & TITLE
(PRINTED OR TYPED)

02 / 26 / 08
DATE

SEQ#: 7734 LOC: 303101 TERR: 23 REF#: 35915073 SW: 0809
TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024
CUSTOMER NO.

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551 FED. ID NO. 396090019

BRANCH - TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
104-375-0098	STEVE HETU		08		M004720721
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
			05	0014	
			LOCATION	TAX EXEMPTION NO.	
			303101		

GENERAL INFORMATION

2886681

Hvdel Cherry LLC
614 N.C. 200 Hwy
Hanfield, N.C. 28163

BILL

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
01/21/10	433810	7M211557	701-888-7140	34 420 7792	PW	.675	.675	.675

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS		CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	MSDS GIVEN
									CLEAN	SPENT							
			Waste pick-up only														

TOTAL SERVICE/PRODUCTS																	
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	CHECK APPROPRIATE BOXES		GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO				
TXR000050930					MACHINE CONDITION & CLEANLINESS	<input type="checkbox"/>	<input type="checkbox"/>	FUSIBLE LINK INSTALLED	<input type="checkbox"/>	<input type="checkbox"/>	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>	<input type="checkbox"/>				
					LAMP ASSEMBLY CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	EMERGENCY CLOSING OF LID UNOBSTRUCTED	<input type="checkbox"/>	<input type="checkbox"/>	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	<input type="checkbox"/>	<input type="checkbox"/>				

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5	6	055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES.
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 (D039) (ERG#128) 6.7 LBS/GAL				717				0 TO 220 LBS./MONTH
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)				801				220 LBS. TO 2,200 LBS./MONTH
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE) UN3267 PGIII (D018, D027, D039, D040) (ERG#153)				11268				GREATER THAN 2,200 LBS./MONTH

See Bill of Lading

DESIGNATED FACILITY NAME AND ADDRESS	SAFETY-KLEEN SYSTEMS, INC.	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
			STATE ID NO.

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INVOICE #	AMOUNT \$	INVOICE #
		AMOUNT \$
PREVIOUS CREDIT CARD NO.		
CREDIT CARD NO.		EXP. DATE
CUSTOMER REFERENCE		

MANIFEST NO.	20721
LDR MESSAGE	
MANIFEST CODE	SEQ #
	5 D
IN THE EVENT OF AN EMERGENCY CALL	

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Print Customer Name: **SCOTTE W. COX**

By: *Scott W. Cox*
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	N/A
DO NOT WRITE IN THE AREA BELOW	
M004720721 433810	

SERVICE AND SALES ACKNOWLEDGMENT
PART 01-1366 (Rev. 05/07)

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

NCD101779735

20721

3. Shipper's Name and Mailing Address
AVDEL CHERRY LLC
614 NC 200 HWY

STANFIELD

NC 28163

4. Shipper's Phone (704 888-7140)

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

SAFETY-KLEEN SYSTEMS, INC

TYR000050930

704 375-0098

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address
000630
SAFETY-KLEEN SYSTEMS, INC.
130-A FRONTAGE ROAD
LEXINGTON, SC 29073

10. US EPA ID Number

C. Facility's Phone

SCD077995488

803 356-4061

11. Shipping Name and Description

12. Containers
No. Type

13. Total
Quantity

14. Unit
Wt/Vol

HM

a. NON-REGULATED LIQUID

005 DM

1000

P

b. USED OIL AND ABSORBENT MIXTURE
(NOT USDOT HAZARDOUS MATERIAL)

003 DM

650

P

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760(24 HR). MFST R/T#109323338 0002-8866-81
A) NONE B) NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 23136 B: 1003 C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

SCOTTEW. COX

Signature

10 26 08

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Philip Mullis

Signature

10 26 08

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551

FED. ID NO. 396090019

BRANCH - TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	STEVE HETU	04/26/08	08-09	23	0036064868
CREDIT CODE			PREVIOUS BALANCE	BAL. OVER 60 DAYS	
CUSTOMER SEGMENT			CHAIN	OUTER COUNTY	1438-41
LOCATION			YES	2288	2340
			TAX EXEMPTION NO.		

B I L L

CUSTOMER INFORMATION

AVDEL CHERRY LLC

514 NC 200 HWY
STANFIELD NC 28163

0 0 0 2 - 8 8 6 6 - 8 1

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT/TAX
2-26-08	433819	7M211757	704-888-7140	24 420 7702	DW	0675	0675	0675

SERV. PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM.	CHANGE SERVICE TERM (WEEKS) (INITIAL)	CHANGE SCH. DATE (BY W/W)	INV. CODE	PROMO NO.	RELEASE NO.	MSD/GVEI
								CLEAN	SPENT	# OF CONT.								
230			1									0						
22444			1					3	11130			24						
00004			1	8.00	0.00	8.00	0.00					0						
00100007			1	7.88	0.00	7.88	0.00					0						
83206		Waste 44 lamps	3	N/C		N/C		4	11130									
83207		Waste 84 lamps	1	N/C		N/C		1	11130									

TOTAL SERVICE/PRODUCTS	15.88	0.00	15.88	0.00	CHECK APPROPRIATE BOXES	GOOD. POOR	DECALS IN PLACE AND LEGIBLE	YES NO	MACHINE PROPERLY GROUNDED	YES NO
------------------------	-------	------	-------	------	-------------------------	------------	-----------------------------	--------	---------------------------	--------

USEPA TRANSPORTER ID NO.	USEPA TRANSPORTER ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	MACHINE CONDITION & CLEANLINESS	FUSIBLE LINK INSTALLED	EMERGENCY CLOSING OF LID UNOBSTRUCTED	LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	SPENT SOLVENT MEETS ACCEPTANCE CRITERIA
--------------------------	--------------------------	------------------------	------------------------	---------------------------------	------------------------	---------------------------------------	--	---

TYR000050930 NCD101779726
11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)

UNIVERSAL WASTE LAMPS NOT USDOT REGULATED	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5163055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES
	CF		P	11130		0 TO 220 LBS./MONTH
						220 LBS. TO 2,200 LBS./MONTH
						GREATER THAN 2,200 LBS./MONTH

See Bill of Lading

DESIGNATED FACILITY NAME AND ADDRESS: CLEANLITES RECYCLING INC, SPARTANBURG SC 29303
USA EPA ID NO. SCR000764969
STATE ID NO.

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		TODAY'S SERVICE/SALE
INVOICE #	AMOUNT \$	PREVIOUS BALANCE AS FOLLOWS
PREVIOUS CREDIT CARD NO.	EXPIRED	
CREDIT CARD NO.		AMEX VISA MC

MANIFEST NO.	64808
LDR MESSAGE	
LDR NOT REQ'D	
MANIFEST CODE	US
SEQ #	12 D

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION, UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Print Customer Name: SCOTIE W. OX
By: [Signature]
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	N/C
DO NOT WRITE IN THE AREA BELOW	
0036064868	
0002-8866-81 -2	

SERVICE AND SALES ACKNOWLEDGMENT
PART 11-1366 (Rev. 06/07)

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)
NCD101779726

Document No.

04868

2. Page 1 of 1

3. Shipper's Name and Mailing Address
AVDEL CHERRY LLC
614 NC 200 HWY

STANFIELD NC 28163

4. Shipper's Phone (704) 888-7140

5. Transporter 1 Company Name
SAFETY-KLEEN SYSTEMS, INC.

6. US EPA ID Number
TXR000050930

A. Transporter's Phone
800 669-5740

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address
CLEANLITES RECYCLING INC
100 FINE RD
SPARTANBURG SC 29303

10. US EPA ID Number
SCR000764969

C. Facility's Phone
864 503-9900

11. Shipping Name and Description

12. Containers
No. Type

13. Total Quantity

14. Unit Wt/Vol

a. HM
UNIVERSAL WASTE LAMPS
NOT USDOT REGULATED

005 CF

220

P

b.

c.

d.

15. Special Handling Instruction and Additional Information

MFST R/T#109323399 0002-8866-81

EMERGENCY RESP 800-468-1760(24 HR).
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 11130 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

SCOTTIE W. COX

Scottie W. Cox

10/22/08

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Philip Mullis

Philip Mullis

10/22/08

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

SHIPPER

USE OR 16A 16B

FACILITY

USE OR 16A 16B



FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	STEVE HETU	04/26/08	08-09	23	0036064867
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			D	3404.87	1438.41
CUSTOMER SEGMENT		CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C
09		0214	YES	2288	2340
LOCATION			TAX EXEMPTION NO.		
303101					

0 0 0 2 - 8 8 6 6 - 8 1

AVDEL CHERRY LLC
 514 NC 200 HWY
 WELDON NC 28163

B
I
L
L

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
2-26-08	433819	7M211757	704-888-7140	34-420-7792	DW	0675	0675	0675

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS		CC	SERVICE TERM	CHANGE SERVICE TERM WEEKS (INITIAL)	CHANGE SCH. DATE (Y WW)	RV. CODE	PROMO NO.	RELEASE NO.	MSDS GIVEN	
									CLEAN	SPENT									
	088888	40139417	76.0000	3	228.00	---	228.00					12							
	088888	40250938	608.0000	1	284.00	---	284.00	182.40				52							
	088888	40158050	76.0000	5	380.00	---	380.00					12							
	088888	40250943	944.0000	1	182.40	---	182.40	284.00				52							
	088888	40250942	216.0000	1	212.00	---	212.00	95.20				52							
	010044			1	8.00	0.00	8.00	0.00				0							
	0100007			1	7.88	0.00	7.88	0.00				0							
							1185.48												

Handwritten notes: "D.M.", "OK", "W. Cherry", "Green", "1185.48"

TOTAL SERVICE/PRODUCTS	1302.28	CHECK APPROPRIATE BOXES	GOOD POOR	DECALS IN PLACE AND LEGIBLE	YES NO	MACHINE PROPERLY GROUNDED	YES NO
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	FUSIBLE LINK INSTALLED		LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	
TXR000050930		NCD101779726		LAMP ASSEMBLY CONDITION		SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5163055	CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:
See Bill of Lading						0 TO 220 LBS./MONTH
						220 LBS. TO 2,200 LBS./MONTH
						GREATER THAN 2,200 LBS./MONTH

DESIGNATED FACILITY NAME AND ADDRESS	CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.	STATE ID NO.
--------------------------------------	---	----------------	--------------

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE
		<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INVOICE #	AMOUNT \$	INVOICE #
		AMOUNT \$
PREVIOUS CREDIT CARD NO.	EXPIRED	CREDIT CARD NO.
CUSTOMER REFERENCE		

MANIFEST NO.	64867
LDR MESSAGE	
LDR NOT REQ'D	
MANIFEST CODE	SEQ #
	11 D

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

By: SCOTTIE W. CX
 Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	1302.28
DO NOT WRITE IN THE AREA BELOW	
0036064867	
0002-8866-81 -2	

SERVICE AND SALES ACKNOWLEDGMENT

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1

NCD101779726

0218167

3. Shipper's Name and Mailing Address

AVDEL CHERRY LLC
614 NC 200 HWY

STANFIELD

NC 28163

4. Shipper's Phone (704 888-7140)

5. Transporter 1 Company Name

6. US EPA ID Number

A. Transporter's Phone

SAFETY-KLEEN SYSTEMS, INC

TXR000050930

704 375 0093

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

C. Facility's Phone

000654
SAFETY-KLEEN SYSTEMS, INC.
633 E 138TH ST
DOLTON, IL 60419

ILD980613913

708 225-8100

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

HM	No.	Type	Quantity	Unit Wt/Vol
a. X	001	DM	50	P
b. -	001	DM	150	P
c.				
d.				

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760(24 HR). MFST R/T#109323342 0002-8866-81
A) NONE B) NONE
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 177072 B: 26480 C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

SCOTTE W. COX

Signature

10 26 08

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Philip Mullis

Signature

10 26 08

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

SHIPPER

USE

16A OR 16B

TRANSPORTER

FACILITY

USE

16A OR 16B



5400 Legacy Drive, Cluster II, B3
Plano, Texas 75024

800-669-5740
www.safety-kleen.com



DUNS NO. 05-397-6551

FED. ID NO. 396090019

BRANCH - TSD

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
704-375-0098	STEVE HETU		08		M004696605

GENERATOR

2 8 8 6 6 8 1

~~Avdel Cherry LLC~~
Avdel Cherry LLC
614 NC 200 HWY
Stanfield, N.C.
28163

BILL

CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
CUSTOMER SEGMENT	CHAIN	OUTER COUNTY
07		
LOCATION	TAX EXEMPTION NO.	
303101		

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
2-26-08	433819	DM211757	704-888-7140	34 420 7792	PW	.675	.675	.675

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	CHANGE SOI DATE (YY WW)	INV. CODE	PROMO NO.	MSC GIVE	
									CLEAN	SPENT	# OF CONT.								
1																			
2																			
3																			
4																			
5																			
6																			
7																			
8																			
9																			
10																			
11																			
12																			

Waste pick-up only

TOTAL SERVICE/PRODUCTS	W/L	CHECK APPROPRIATE BOXES	GOOD	POOR	DECALS IN PLACE AND LEGIBLE	YES	NO	MACHINE PROPERLY GROUNDED	YES	NO
USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.	MACHINE CONDITION & CLEANLINESS	FUSIBLE LINK INSTALLED			LOCAL PHONE NO. STICKER AFFIXED TO MACHINE		
TYR000050930				LAMP ASSEMBLY CONDITION	EMERGENCY CLOSING OF LID UNOBSTRUCTED			SPENT SOLVENT MEETS ACCEPTANCE CRITERIA		

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	5163055	I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES:
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PG III (D039) (ERG#128) 6.7 LBS/GAL				717		0 TO 220 LBS./MONTH
WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PG III RQ (D001) (ERG#128) 6.7 LBS/GAL (D018, D039, D040)				801		220 LBS. TO 2,200 LBS./MONTH
WASTE CORROSIVE LIQUID, BASIC, ORGANIC, NOS (MONOETHANOLAMINE) 8 UN3267PGIII (D018, D027, D039, D040) (ERG#153)				11268		GREATER THAN 2,200 LBS./MONTH
See Bill of Lading						

DESIGNATED FACILITY NAME AND ADDRESS	SAFETY-KLEEN SYSTEMS, INC.	I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.	USA EPA ID NO.
			STATE ID NO.

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE
		<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS
INVOICE #	AMOUNT \$	INVOICE #
		AMOUNT \$
PREVIOUS CREDIT CARD NO.		
CREDIT CARD NO.		
AMEX	EXP. DATE	
VISA		
MC		

MANIFEST NO.	96605
LDR MESSAGE	
MANIFEST CODE	SEQ #
	14 D

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SCOTIE COX
Print Customer Name
By: *[Signature]*
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	W/L
DO NOT WRITE IN THE AREA BELOW	
M004696605	
433819	

SERVICE AND SALES ACKNOWLEDGMENT

IN THE EVENT OF AN EMERGENCY CALL

BILL OF LADING/MANIFEST		1. Shipper's US EPA ID No. (If Applicable) NC D101773726	Document No. 9.6.05	2. Page 1 of 1
3. Shipper's Name and Mailing Address AVDEL CHERRY, LLC 614 NC 200 HWY STANFIELD NC 28163				
4. Shipper's Phone (704) 888-7140				
5. Transporter 1 Company Name SAFETY KLEEN SYSTEMS, INC		6. US EPA ID Number TXR000050350		A. Transporter's Phone 704-375-0098
7. Transporter 2 Company Name		8. US EPA ID Number		B. Transporter's Phone
9. Designated Facility Name and Site Address CLEANLITES RECYCLING INC 100 FINE RD SPARTANBURG SC 29303		10. US EPA ID Number SCR000764969		C. Facility's Phone 864 503-9900
11. Shipping Name and Description			12. Containers	13. Total Quantity
a. <input checked="" type="checkbox"/> HM BATTERIES, DRY, CONTAINING, POTASSIUM HYDROXIDE SOLID, 8 UN3028 PGI III (USED DRY ALKALINE BATTERIES - MIXED)			No. Type 001 DM	10 P
b.				
c.				
d.				
15. Special Handling Instruction and Additional Information EMERGENCY RESP 800-468-1760(24 HR). A) NONE SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY. A) ERG#154 MFST R/T#109323425 0002-8866-81 SKDOT# A: 177075 B: C: D:				
16a. US DOT HAZARDOUS MATERIALS SHIPPER'S CERTIFICATION: <small>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.</small>				
Printed/Typed Name		Signature required here if US DOT regulated		Month Day Year
16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.				
Printed/Typed Name SCOTTIE COX		Sign here if material is not DOT regulated		Month Day Year 10/26/08
17. Transporter 1 Acknowledgement of Receipt of Materials				
Printed/Typed Name Philip Mullis		Signature Philip Mullis		Month Day Year 10/26/08
18. Transporter 2 Acknowledgement of Receipt of Materials				
Printed/Typed Name		Signature		Month Day Year
19. Discrepancy Indication Space				
20. Facility Owner or Operator: Certification of receipt of materials covered by this form except as noted in Item 19.				
Printed/Typed Name		Signature		Month Day Year

IN EVENT OF EMERGENCY CALL
1-800-468-1760 (24 hours)

SHIPPER USE OR TRANSPORTER FACILITY

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

ESTIMATE# 2980431 ACCT# 0000000000
SERV. TAX: 0.06750 GEN. NO. 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STAMPED
PHONE 704-888-7140
PURCHASE ORDER# V201479

REFERENCE NUM
0035730078
SRVC WELX: 18-07
SRVC DATE: 02/11/08 10:28
NC 28163

FAX EXEMPTION NUM:

PRODUCT / SERVICES

SERVICE / PRODUCT	QTY	UNIT	PRICE	TAX	TOTAL CHARGE
3230 TAX HANDLING N/C DRUM DROP	0		0.0000	0.00	0.00
10044 EXCLUDED SERVICE AREA FEE	0		0.0000	0.00	0.00
100007 FEE, FUEL SURCHARGE, NON TAX	1		9.8500	0.00	9.85
83383 DRUM, 55 WASTE, O.F.	4		240.0000	0.00	960.00
22555 OIL SERVICE (021122555) CLEAN O SPENT O SERVICE TERM 24	1		0.0000	0.00	0.00
TOTAL SERVICE/PRODUCTS			969.8500	0.00	969.85

USEPA TRANSPORTER 1 (K000005000)
USEPA TRANSPORTER 2
FORM CODE PP 2

GENERATOR ID: NC01017926
GENERATOR STATE:

USEPA TRANSPORTER (INCLUDING EXEMPT SHIPPING NAME, HAZARD CLASS, AND TO DRAINED USED OIL FILTERS (NOT USED OR USEPA REGULATED))

TOTAL CONT 4 TWT OF TIL QTY 650 UNIT WT/VOL P SKID 1476
CNT# 71110014053 QTY 200
CNT# 80105013408 QTY 150
CNT# 80105013409 QTY 150
CNT# 80105013410 QTY 150

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YACKIN AVE

CHARLOTTE, NC 28205

USEPA ID NO: NC01079061059
STATE ID NO:

TOTAL CHARGE 969.85
WASTE MIN 0.00
TOTAL DUE 969.85

UNPAID BALANCE THIS RECEIPT 969.85

- Machine clean and good condition? Yes
- Decals in place and legible? Yes
- Fusible link installed? Yes
- Emergency closing of lid unobstructed? Yes
- Machine properly grounded? Yes
- Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 220 - 2200 lbs/month

Customer certifies that (i) the above named materials are properly identified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges, and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgment is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution.
IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 hours)

Henry Blomer

www.safety-kleen.com // SummitMIND. // 81
 Status: :
 Required: s Type :
 BIOLOGIE:
 Asset Tag:
 Cus
 BL
 Cus
 3
 OC
 All
 DOC #
 MANF #
 30G
 2007
 C #
 INF #
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 2007
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 2007
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 IF #
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 IF #
 2007

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0098

ACCOUNT# 2000691 AVANT COMPANY LLC
SERV#1 TAX: 0.06750 614 NC 200 INVY
COMS TAX: 0.06750
PURCHASE TAX: 0.06750 STANFIELD
PHONE: 704 888-7140
PURCHASE ORDER#

REFERENCE NBR 009900120
SERV. WEEK: 07 49
SERV. DATE: 12/05/07 10:47
NC 28163

TAX EXEMPTION NBR:

PRODUCT / SERVICES

SERVICE/PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
10044 EXHAUST SERVICE AIR A FLE	0	0.0000	0.00	0.00
10000 FLE, FULL SURCHARGE	1	7.8800	0.53	8.41
50000 COMS MOD 50 W/105 RECYCLED	1	77.5000	4.89	77.39
S/N 60699 CLEAN 5 SPENT 0				
SERVICE TERM 52				
50000 COMS MOD 52 W/105 RECYCLED	1	94.0000	6.35	100.35
S/N 80699 CLEAN 15 SPENT 13				
SERVICE TERM 12				
52000 COMS MOD 52 W/105 RECYCLED	1	94.0000	6.35	100.35
S/N 78699 CLEAN 15 SPENT 13				
SERVICE TERM 12				
TOTAL SERVICE PRODUCTS	268	3800	18.12	286.50

USEPA HAZARDOUS WASTE EXEMPTION CODE
USEPA HAZARDOUS WASTE 2
FORM CODE DP

GENERATOR ID NC010179726
GENERATOR STATE

IDENTIFICATION NUMBER, PROPER SHIPPING NAME, HAZARD CLASS, AND TO
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PG111
RD(D001)
(D018, D039, D040)ERG#128
TOTAL CONT 2 TYP: IM 111 QTY 26 UNIT W/VOL G SKU#1 801
CNT# 71110013747 QTY 13
CNT# 71110013748 QTY 13

DESIGNATED FACILITY NAME / ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE

CHARLOTTE, NC 28205

USEPA ID NO NC010179726	TOTAL CHARGE	286.50
STATE ID NO	WASTE MIN	0.00
	TOTAL DUE	286.50

UNPAID BALANCE THIS RECEIPT 286.50

- Machine clean and good condition? Yes
- Decals in place and legible? Yes
- Fusible link installed? Yes
- Emergency closing of lid unobstructed? Yes
- Machine properly grounded? Yes
- Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 220 - 2200 lbs/month

Customer certifies that (i) the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgment is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaning and paint gun cleaning services. Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean part/paint gun that have been contaminated with or otherwise introduce polyhalogenated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution.

IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1260 (24 hours)

www.safety-kleen.com // Stanfield. // 5681

ENC CSG# 23,
:47:38 AM Depart

lit Status:
ID:
Required:
ness Type
ber:

HNOLOGIES

Asset Tag # Qty AME
1 N
1 N
1 N
1 N
1 N

Labels 3 Leg: Not

Custom
• BLANKE

Custom
Date
09/10/2007
09/05/2007
08/22/2007
08/22/2007

Allied F
Year
2007-26 20
2007-2
2007-12 20
2007-18 20
2007-34 20
2007-18
2007-42 20
2007-7 20
2007-19
2007-36
2007-36
2007-12 20
2007-18
2007-34 20

PrintRouteWe

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 35384126

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000704

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 Lq LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:
100 O-CRESOL
101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
240 2,4,6-TRICHLOROPHENOL
248 BARIUM
250 CADMIUM
251 CHROMIUM (TOTAL)
255 LEAD
257 MERCURY - ALL OTHERS
260 SILVER
67 BENZENE
91 CHLOROFORM

LDR FORM LINE NO.: 2 MANIFEST PAGE/LINE# 01/002 SK PRFL NO.: 0000
SKDOT#: 0000801

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 Lq LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:
100 O-CRESOL
101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
240 2,4,6-TRICHLOROPHENOL
248 BARIUM
250 CADMIUM
251 CHROMIUM (TOTAL)
255 LEAD
257 MERCURY - ALL OTHERS
260 SILVER
67 BENZENE
91 CHLOROFORM

NOTES

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2007

GENERATOR'S AUTHORIZED SIGNATURE: *[Signature]* NAME & TITLE: *[Signature]* DATE: 12/25/07

SEQ#: 8094 LOC: 303101 TERR: 23 REF#: 35384126 SW: 0749

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

K54474-R5732
LOCATION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

08/18/07 PAGE: 1
07:43:35

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 34823769

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 269.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 269 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000801

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LQ LIQUID >= 10% TOC
D018
D039
D040


TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

100 O-CRESOL
101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM
P-CRESOL)
102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM
M-CRESOL)
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
240 2,4,6-TRICHLOROPHENOL
248 BARIUM
250 CADMIUM
251 CHROMIUM (TOTAL)
255 LEAD
257 MERCURY - ALL OTHERS
260 SILVER
67 BENZENE
91 CHLOROFORM

NOTES

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2007


GENERATOR'S AUTHORIZED
SIGNATURE

Ronnie Black
NAME & TITLE
(PRINTED OR TYPED)

9 / 10 / 2007
DATE

SEQ#: 8986 LOC: 303101

TERR: 23 REF#: 34823769 SW: 0737

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TRANSFER

Safety-Kleen

5400 Legacy Dr.
Cluster 11, Building 3
Plano, Texas 75024
704-375-0098

CUSTOMER# 2886681 AMDEL CHERRY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NBR
0034279299
SRVC WEEK: 07-25
SRVC DATE: 06/19/07 10:14
NC 28163

TAX EXEMPTION NBR:

PRODUCT / SERVICES

SERVICE / PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
10044 EXTENDED SERVICE AREA FLE	0	0.0000	0.00	0.00
100001 FEE, FUEL SURCHARGE	1	7.8800	0.00	7.88
52000 COMS MODEL 52 W/105 RECYCLE	1	94.0000	6.35	100.35
S/N 88699 CLEAN 15 SPENT 13 SERVICE TERM 12				
52000 COMS MODEL 52 W/105 RECYCLE	1	94.0000	6.35	100.35
S/N 78699 CLEAN 15 SPENT 13 SERVICE TERM 12				
TOTAL SERVICE / PRODUCTS			195.8800	12.70
				208.58

USEPA TRANSPORTER 1 EXEMPTION# 00134
USEPA TRANSPORTER 2
FORM CODE DP
GENERATOR ID NCD101779726
GENERATOR STATE

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PG111 RQ
(D001)ERG#128 (6.7#/GL)(D018,D039,D040)
TOTAL CONT 2 TYPE DM IIL QTY 26 UNIT W/VOL G SKU01 801
CNT# 70526014021 QTY 13
CNT# 70526014022 QTY 13

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 VADKIN AVE

CHARLOTTE, NC 28205

USEPA ID NO NCD079060059	TOTAL CHARGE	208.58
STATE ID NO	WASTE MIN	0.00
	TOTAL DUE	208.58

UNPAID BALANCE THIS RECEIPT 208.58

Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 220 - 2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution.
IN THE EVENT OF AN EMERGENCY CALL 1-800-460-1760 (24 hours)

www.safety-kleen.com

E NC CSG# 23, Tue
10:00 AM Route End: 6/19/07
10:43:23 AM Departure T

6681

lit Status: N/A
ID: NCI
Required: No
ness Type
iber: 9

CHNOLOGIES

# Asset Tag #	Qty	AMB	Unit P
	1	N	\$8
	1	N	\$7
	1	N	\$94
	1	N	\$94

Labels 2 Legal Backer Not Needed

M
D
LED
LED
CHECK

54474-R5732
LOCATION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

05/26/07 PAGE: 1
08:17:22

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 34279299

CUST#: 0002-8866-81

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS
WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDOT#: 0000801

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LQ LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

- WASTE CONSTITUENT NOTIFICATION:
- 100 O-CRESOL
 - 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
 - 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
 - 229 TETRACHLOROETHYLENE
 - 237 TRICHLOROETHYLENE
 - 240 2,4,6-TRICHLOROPHENOL
 - 248 BARIUM
 - 250 CADMIUM
 - 251 CHROMIUM (TOTAL)
 - 255 LEAD
 - 257 MERCURY - ALL OTHERS
 - 260 SILVER
 - 67 BENZENE
 - 91 CHLOROFORM

NOTES

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2007

<i>[Signature]</i>	<i>LARRY HAZEN</i>	<i>05/11/2007</i>
GENERATOR'S AUTHORIZED SIGNATURE	NAME & TITLE (PRINTED OR TYPED)	DATE

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano, Texas 75024
704-375-0008

CUSTOMER# 2886681 AVOEL THERMY LLC
SERVICE TAX: 0.06750 614 NC 200 HWY
CONS TAX: 0.06750
PRODUCT TAX: 0.06750 STANFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NDR 0133784467
SRV: W/LK: 07 18
SRV: DATE: 05/02/07 12:18
NC: 28163

TAX EXEMPTION NDR:

CSG# 23, Wednes
AM Route End: 4/4/20
7 PM Departure Time:

PRODUCT / SERVICES

SERVICE / PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE
3230 TAX HANDLING N/C DRUM DROP	1	0.0000	0.00	0.00
10044 EXTENDED SERVICE AIR A FLE	0	0.0000	0.00	0.00
100001 FEE, FUEL SURCHARGE	1	7.8800	0.00	7.88
3207 BOX FLOR BULBS 6"	1	99.8400	0.00	99.84
83207 WASTE 8" FLORBULB CST	1	0.0000	0.00	0.00
22444 FLUORESCENT BULB PROGRAM CLEAN 0 SPENT 0 SERVICE TERM 24	1	0.0000	0.00	0.00
TOTAL SERVICE/PRODUCTS		107.7200	0.00	107.72

USEPA TRANSPORTER 1 180000050930
USEPA TRANSPORTER 2
MANIFEST TRACKING # 84467

GENERATOR ID NCU10179726
GENERATOR STATE
FORM CORE BL SK TRACKING # 108343293

USEPA DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
UNIVERSAL WASTE LAMPS
NOT USDOT REGULATED
TOTAL CONT 1 TYPE OF TIL QTY 60 UNIT W/VOL P SKUDT 11130
CNT# 70310015340 QTY 60

DESIGNATED FACILITY NAME / ADDRESS:
CLEANLITES RECYCLING INC
100 FINE RD

PARTANBURG SC 29303

SEPA ID NO SCR000764909 TOTAL CHARGE 107.72
STATE ID NO WASTE MIN 0.00

TOTAL DUE 107.72

UNPAID BALANCE THIS RECEIPT 107.72

is in clean and good condition? Yes
is in place and legible? Yes
ble link installed? Yes
gency closing of lid unobstructed? Yes
ine properly grounded? Yes
l solvent meets acceptance criteria? Yes

ATOR STATUS 220 - 2200 lbs/month

Customer certifies that (i) the above named materials are properly identified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred in the characteristics of the waste/material or in the process of handling the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) General Terms and Conditions provided separately to Customer or by SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment advised section, SK is authorized to charge Customer's account for this section. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. Following provision is applicable to Safety Kleen's parts cleaner and jet gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution.

IN THE EVENT OF AN EMERGENCY CALL 1 800 468 1760 (24 hours)

Henry Edwards

www.safety-kleen.com // 800.468.1760

atus: N/A
NCD10
ired: No
Type 9

OLOGIES Se
Pi

Asset Tag #	Qty	AMB	Unit Pri
	1	N	\$0.00
	1	N	\$8.00
	1	N	\$7.00
	1	N	\$0.00

Labels 3
Legal Backer Not Needed

OGRAM
CYCLED
RECYCLED
RECYCLED
QUAL CHECK
AL)

BILL OF LADING/MANIFEST

1. Shipper's US EPA ID No. (If Applicable)

Document No.

2. Page 1 of 1

NC D101779726

84467

3. Shipper's Name and Mailing Address

AVDEL CHERRY LLC
614 NC 200 HWY

STANFIELD

NC 28163

4. Shipper's Phone (704) 888-7140

5. Transporter 1 Company Name

SAFETY-KLEEN SYSTEMS INC

6. US EPA ID Number

TXD000050930

A. Transporter's Phone

800 669 5740

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

CLEANLITES RECYCLING INC
100 FINE RD
SPARTANBURG SC 29303

10. US EPA ID Number

SCR000764969

C. Facility's Phone

864 503-9900

11. Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit W/Vol

HM	No.	Type	Quantity	Unit W/Vol
a.				

UNIVERSAL WASTE LAMPS
NOT USDOT REGULATED

001

CF

60

P

15. Special Handling Instruction and Additional Information

EMERGENCY RESP 800-468-1760 (24 HR). MFST R/T#108343293 0002-8866-81
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.

SKDOT# A: 11130 B: C: D:

16a. US DOT HAZARDOUS MATERIALS SHIPPER'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.

Printed/Typed Name

Signature required here if US DOT regulated

Month Day Year

16b. NON-REGULATED SHIPPER'S CERTIFICATION: I certify the materials described above on this form are not subject to federal regulations for Transportation or Disposal.

Printed/Typed Name

Sign here if material is not DOT regulated

Month Day Year

LARRY HENSON

Signature: Larry Henson
Month Day Year: 05/02/07

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

Philip Mullis

Signature: Philip Mullis

Month Day Year: 10/5/02

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name

Signature

Month Day Year

SHIPPER

USE OR 16B

TRANSPORTER

FACILITY

Safety-Kleen

5400 Legacy Dr.
Cluster II, Building 3
Plano Texas 75024
704-375-0098

CUSTOMER# 2080631 AMULI CHEMRY LLC
SERVICE TAX: 0.06750 G14 NC 200 HWY
COMS TAX: 0.06750
PRODUCT TAX: 0.06750 STANTFIELD
PHONE 704-888-7140
PURCHASE ORDER#

REFERENCE NBR 0033740197
SRVC WLFK: 07-13
SRVC DATE: 03/28/07 11:26
NC 28163

TAX EXEMPTION NBR:

PRODUCT/SERVICES

Table with columns: SERVICE/PRODUCT, QTY, UNIT PRICE, TAX, TOTAL CHARGE. Includes items like 10044 EXTENDED SERVICE AREA FEE, 100001 FEE, FUEL SURCHARGE, 52000 COMS MODEL 52 W/105 RECYCLE, S/N 88699 CLEAN 15 SPENT 13, SERVICE TERM 12, 52000 COMS MODEL 52 W/105 RECYCLE, S/N 78699 CLEAN 15 SPENT 13, SERVICE TERM 12.

TOTAL SERVICE /PRODUCTS 195 8800 12.70 208.58

USEPA TRANSPORTER 1 THROUGHOUTS OF GENERATOR TO NC010179726
USEPA TRANSPORTER 2 GENERATOR STATE
FORM CODE DP

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)
WASTE COMBUSTIBLE LIQUID, N.O.S.
(PETROLEUM NAPHTHA) NA1993 PG111 RD
(0001)ERG#128 (6.7#/GL)(D018,D039,D040)
TOTAL CNT 2 TYPE DM TIL QTY 26 UNIT W/VOLE G SKID 801
CNT# 70303014530 QTY 13
CNT# 70303014531 QTY 13

DESIGNATED FACILITY NAME/ADDRESS:
SAFETY-KLEEN SYSTEMS, INC.
2320 YADKIN AVE

CHARLOTTE, NC 28205

USEPA ID NO NC010179726 TOTAL CHARGE 208.58
STATE ID NO WASTE MIN 0.00
TOTAL DUE 208.58

UNPAID BALANCE THIS RECEIPT 208.58

- Machine clean and good condition? Yes
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 220 - 2200 lbs/month

Customer certifies that (i) the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer.

The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services. Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution.
IN THE EVENT OF AN EMERGENCY CALL 1-800-460-1760 (24 hours)

Signature of Larry Blowers

SAFETY-KLEEN SYSTEMS, INC.
MANIFEST FOR SALES SERVICE
NOTIFY THAT THIS IS LAND DISPOSAL RES
E NOTIFICATION

LINE# 01/001 SK PF
IF ANY):
10% TOC

SH FROM
SH FROM

www.safety-kleen.com

D T E S
/2007
D OR TYPED)
TERR: 23 REI
PY: FACILITY BI

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX OR SALES SERVICE NO.: 33740197

CUST#: 0002-8866-B1

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000 SKDOT#: 0000901

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY): D001 LG LIQUID >= 10% TOC D018 D039 D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
240 2,4,6-TRICHLOROPHENOL
248 BARIUM
250 CADMIUM
251 CHROMIUM (TOTAL)
255 LEAD
257 MERCURY - ALL OTHERS
260 SILVER
67 BENZENE
91 CHLOROFORM

NOTES

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2007

Signature of Larry Bleason, NAME & TITLE, DATE 3/28/07

K54474-R5732
LOCATION: 303101

SAFETY-KLEEN
LDR NOTIFICATION FORM

03/03/07 PAGE: 1
08:10:02

GENERATOR NAME: AVDEL CHERRY LLC

MANIFEST NO.: XXXXX
OR SALES SERVICE NO.: 33740197

CUST#: 0002-8866-B1

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01/001 SK PRFL NO.: 0000
SKDDT#: 0000801

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LG LIQUID >= 10% TOC
D018
D039
D040


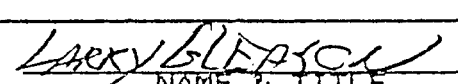
TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 101 M-CRESOL (DIFFICULT TO DISTINGUISH FROM P-CRESOL)
- 102 P-CRESOL (DIFFICULT TO DISTINGUISH FROM M-CRESOL)
- 229 TETRACHLOROETHYLENE
- 237 TRICHLOROETHYLENE
- 240 2, 4, 6-TRICHLOROPHENOL
- 248 BARIUM
- 250 CADMIUM
- 251 CHROMIUM (TOTAL)
- 255 LEAD
- 257 MERCURY - ALL OTHERS
- 260 SILVER
- 67 BENZENE
- 91 CHLOROFORM

NOTES

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2007

		<u>3</u> / <u>28</u> / <u>07</u>
GENERATOR'S AUTHORIZED SIGNATURE	NAME & TITLE (PRINTED OR TYPED)	DATE

SEQ#: 8933 LOC: 303101 TERR: 23 REF#: 33740197 SW: 0713
 TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFE