DELIVERY ORDER NUMBER DO-DOO!

DOR SENT 11Sept 87

DO RECEIVED 2NOV 87

SCHEDULED PICK UP DATE 11-23-87-THUR-12-16-87

ACTUAL PICK UP DATE SAME AS ABOVER

COMEBACK COPY DATE

DISCREPANCY REPORT DUE COMPRETED 12-17-87

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#### THIS PARAGRAPH APPLIES ONLY TO QUOTATIONS SUBMITTED:

Supplies are of domestic origin unless otherwise indicated by quoter. The Government reserves the right to consider quotations or modifications thereof received after the date indicated should such action be in the interest of the Government. This is a request for information and quotations furnished are not offers. When quoting, complete blocks 11, 12, 22, 23, 25. If you are unable to quote, please advise. This request does not commit the Government to pay any cost incurred in preparation or the submission of this quotation or to procure or contract for supplies or services.

#### GENERAL PROVISIONS

- 1. INSPECTION AND ACCEPTANCE Inspection and acceptance will be at destination, unless otherwise provided. Until delivery and acceptance, and after any rejections, risk of loss will be on the Contractor unless loss results from negligence of the United States Government. Notwithstanding the requirements for any Government inspection and test contained in specifications applicable to this contract, except where specialized inspections or tests are specified for performance solely by the Government, the contractor shall perform or have performed the inspections and tests required to substantiate that the supplies and services provided under the contract conform to the drawings, specifications and contract requirements listed herein, including if applicable the technical requirements for the manufactures' part numbers specified herein.
- VARIATION IN QUANTITY No variation in the quantity of any item called for by this contract will be accepted unless such variation has been caused by conditions of loading, shipping, or packing, or allowances in manufacturing processes, and then only to the extent. If any, specified elsewhere in this contract.
- 3. PAYMENTS Invoices shall be submitted in quadruplicate (one copy shall be marked "Original") unless otherwise specified, and shall contain the following information: Contract or order number, item number, contract description of supplies or services, sizes, quantities, unit prices and extended totals. Bill of lading number and weight of shipment will be shown for shipments on Government Bills of Lading. Unless otherwise specified, payment will be made on partial deliveries accepted by the Government when the amount due on such deliveries so warrants.
- 4. DISCOUNTS In connection with any discount offered, time will be computed from date of delivery of the supplies to carrier when acceptance is at the point of origin, or from date of delivery at destination or port of embarkation when delivery and acceptance are at either of these points, or from the date the correct invoice or voucher is received in the office specified by the Government, if the latter is later than date of delivery. Payment is deemed to be made for the purpose of earning the discount on the date of mailing of the Government check.
- 5. DISPUTES (This contract is governed by the Contract Disputes Act of 1978 (Public Law 95-563) (the "Act"). The Act provides administrative procedures for the submittal, analysis, negotiation, and if necessary, litigation of claims relating to this contract. The parties to this contract must comply with certain time restrictions on rendering of contracting officer decisions on claims, and on the appeal of those decisions. Further details on the rights and remedies under the Act may be found in the DAR at 1-314.)
- 6. FOREIGN SUPPLIES This contract is subject to the Buy American Act (41 U.S.C. 10a-d) as implemented by Section VI of the DAR and any restrictions in appropriation acts on the procurement of foreign supplies. The quotation must identify any foreign items to be furnished.
- 7. CONVICT LABOR In connection with the performance of work under this contract, the Contractor agrees not to employ any person undergoing sentence of imprisonment except as provided by Public Law 89-176, September 10, 1965 (18 U.S.C. 4082(c)(2)) and Executive Order 11755, December 29, 1973.
- 8. OFFICIALS NOT TO BENEFIT No member of or Delegate to Congress or resident commissioner, shall be admitted to any share or part of this contract, or to any benefit that may arise therefrom, but this provision shall not be construed to extend to this contract if made with a corporation for its general benefit.
- 9. COVENANT AGAINST CONTINGENT FEES The Contractor warrants that no person or selling agency has been employed or retained to solicit or secure this contract upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee, excepting bona fide employees or bona fide established commercial or selling agencies maintained by the Contractor for the purpose of securing business. For breach or violation of this warranty the Government shall have the right to annul this

contract without liability or in its discretion to deduct from the contract price or consideration or otherwise recover, the full amount of such commission, percentage, brokerage or contingent fee.

- 10. GRATUITIES (a) The Government may, by written notice to the Contractor, terminate the right of the Contractor to proceed under this contract if it is found after notice and hearing, by the Secretary or his duly authorized representative, that gratuities (in the form of entertainment, gifts or otherwise) were offered or given by the Contractor, or any agent or representative of the Contractor, to any officer or employee of the Government with a view toward securing a contract or securing favorable treatment with respect to the awarding or amending, or the making of any determinations with respect to the performing of such contract, provided, that the existence of the facts upon which the Secretary or his duly authorized representative make such findings shall be in issue and may be reviewed in any competent court. (b) In the event this contract is terminated as provided in paragraph (a) hereof the Government shall be entitled (i) to pursue the same remedies against the Contractor as it could pursue in the event of a breach of the contract by the Contractor and (ii) as a penalty in addition to any other damages to which it may be entitled by law to exemplary damages in an amount (as determined by the Secretary or his duly authorized representative) which shall be not less than three nor more than ten times the costs incurred by the Contractor in providing any such gratuities to any such officer or employee. (c) The rights and remedies of the Government provided in this clause shall not be exclusive and are in addition to any other rights and remedies provided by law or under this contract.
- 11. CONDITION FOR ASSIGNMENT This Purchase Order may not be assigned pursuant to the Assignment of Claims Act of 1940, as amended (31 U.S.C. 203, 41 U.S.C. 15), unless or until the supplier has been requested and has accepted this order by executing the Acceptance hereon.
- 12. COMMERCIAL WARRANTY The Contractor agrees that the supplies or services furnished under this contract shall be covered by the most favorable commercial warranties the Contractor gives to any customer for such supplies or services and that the rights and remedies provided herein are in addition to and do not limit any rights afforded to the Government by any other clause of this contract.
- 13. PRIORITIES, ALLOCATIONS, AND ALLOTMENTS
  —The Contractor shall follow the provisions of DMS Reg. 1, or DPS
  Reg. 1 and all other applicable regulations and orders of the Bureau
  of Domestic Commerce in obtaining controlled materials and other
  products and materials needed to fill this order.

#### 14. FAST PAYMENT PROCEDURE-

- (a) General. This is a fast payment order. Invoices will be paid on the basis of the Contractor's delivery to a post office, common carrier, or, in shipment by other means, to the point of first receipt by the Government.
- (b) Responsibility for Supplies. Title to the supplies shall vest in the Government upon delivery to a post office or common carrier for shipment to the specified destination. If shipment is by means other than post office or common carrier, title to the supplies shall vest in the Government upon delivery to the point of first receipt by the Government. Notwithstanding any other provision of the purchase order, the Contractor shall assume all responsibility and risk of loss for supplies (i) not received at destination, (ii) damaged in transit, or (iii) not conforming to purchase requirements. The Contractor shall either replace, repair, or correct such supplies promptly at his expense, provided instructions to do so are furnished by the Contracting Officer within ninety (90) days from the date title to the supplies vests in the Government. (180 days for oversea shipment.)
  - (c) Preparation of Invoice.
- (1) Upon delivery of supplies to a post office, common carrier, or in shipments by other means, the point of first receipt by the Government, the Contractor shall prepare an invoice in accordance with Clause 3 of the General Provisions of Purchase Order, except that invoices under a blanket purchase agreement shall be prepared in accordance with the provisions of the agreement. All invoices shall also be prominently marked "Fast Pay."
- (2) If the purchase price excludes the cost of transportation, the Contractor shall enter the prepaid shipping cost on the invoice as a separate item. The cost of parcel post insurance will not be paid by the Government. If transportation charges are separately stated on the invoice, the Contractor agrees to retain related paid freight bills or other transportation billings paid separately for a period of three (3) years and to furnish such bills to the Government when requested for audit purposes.
- (3) In the event this order requires the preparation of a Material Inspection and Receiving Report (DD Form 250), the Contractor has the option of either preparing the DD Form 250 or including the following information on the invoice, in addition to that required in (c)(1) above: (A) a statement in prominent letters

"NO DD 250 PREPARED", (B) shipment number: (C) mode of shipment; and (D) at line item level, (i) National Stock Number and/ or manufacturer's part number, (ii) unit of measure, (iii) Ship-To-Point, (iv) Mark-For-Point if in contract, and (v) MILSTRIP document number if in contract, When a DD Form 250 is not required, the invoice will include the following information: (i) Ship-To-Point, (ii) Mark-For-Point and MILSTRIP document number if in contract, as well as the information in (c)(i) above. In all cases where no DD Form 250 is prepared, a copy of the invoice will be included in each shipment.

(d) Certification of Invoice. The Contractor agrees that the submission of an invoice to the Government for payment is a certification that the supplies for which the Government is being billed have been shipped or delivered in accordance with shipping instructions issued by the ordering officer, in the quantities shown on the invoice, and that such supplies are in the quantity and of the quality designated by the cited purchase order.

#### OUTER SHIPPING CONTAINERS SHALL BE

15. (This clause applies if this contract is for services and is not exempted by applicable regulations of the Department of Labor.)

SERVICE CONTRACT ACT OF 1965 — Except to the extent that an exemption, variation or tolerance would apply pursuant to 29 CFR 4.6 if this were a contract in excess of \$2,500, the Contractor and any subcontractor hereunder shall pay all of his employees engaged in performing work on the contract not less than the minimum wage specified under section 6(a)(1) of the Fair Labor Standards Act of 1938, as amended (current minimum wage). However, in cases where section 6 (e)(2) of the Fair Labor Standards Act of 1938 is applicable, the rates specified therein will apply. All regulations and interpretations of the Service Contract Act of 1965 expressed in 29 CFR Part 4 are hereby incorporated by reference in this contract.

#### **ADDITIONAL GENERAL PROVISIONS**

- 16. CHANGES- The Contracting Officer may at any time, by a written order, and without notice to the sureties, make changes, within the general scope of this contract, in (i) drawings, designs, or specifications, where the supplies to be furnished are to be specially manufactured for the Government in accordance therewith: (ii) method of shipment or packing and (iii) place of delivery. If any such change causes an increase or decrease in the cost of, or the time required for performance of this contract, whether changed or not changed by any such order, an equitable adjustment shall be made by written modification of this contract. Any claim by the Contractor for adjustment under this clause must be ass within 30 days from the date of receipt by the Contractor of the notification of change provided that the Contracting Officer, if he decides that the facts justify such action, may receive and act upon any such claim if asserted prior to final payment, under this contract. Failure to agree to any adjustment shall be a dispute concerning a question of fact within the meaning of the clause of this contract entitled "Disputes." However, nothing in this clause shall excuse the Contractor from proceeding with the contract as changed.
- 17. TERMINATION FOR DEFAULT The Contracting Officer, by written notice, may terminate this contract, in whole or in part, for failure of the Contractor to perform any of the provisions hereof. In such event, the Contractor shall be liable for damages, including the excess cost of reprocuring similar supplies or services; provided that, if (1) it is determined for any reason that the Contractor was not in default or (ii) the Contractor's failure to perform is without his and his subcontractor's control, fault or negligence, the termination shall be deemed to be a termination for convenience under paragraph 18. As used in this provision the term "subcontractors" and "subcontractors" means subcontractors at any tier.
- 18. TERMINATION FOR CONVENIENCE The Contracting Officer, by written notice, may terminate this contract, in whole or in part, when it is in the best interest of the Government. If this contract is for supplies and is so terminated, the Contractor shall be compensated in accordance with Section VIII of the Defense Acquisition Regulation in effect on this contract's date. To the extent that this contract is for services and is so terminated, the Government shall be liable only for payment in accordance with the payment provisions of this contract for services rendered prior to the effective date of termination.
- 19. ASSIGNMENT OF CLAIMS Claims for monies due or to become due under this contract shall be assigned only pursuant to the Assignment of Claims Act of 1940, as amended (31 U.S.C. 203, 41 U.S.C. 15). However, payments to an assignee of monies under this contract shall not, to the extent provided in said Act, as amended, be subject to reduction or set-off (See Clause 11).

#### ACCEPTANCE

THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.

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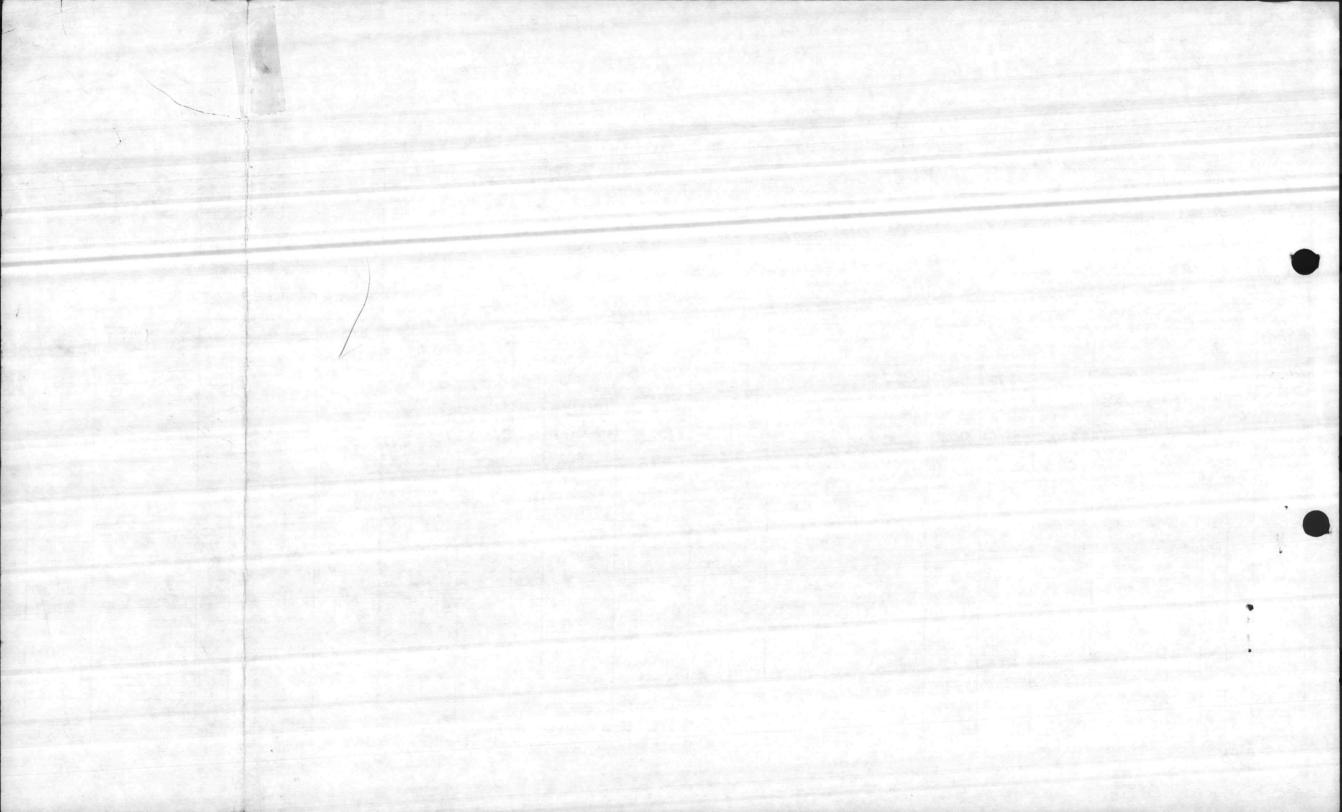
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HQ DRMS Form 1786 (Previous edition to be used until exhausted)

(SEE REVERSE FOR ADDITIONAL REMARKS IF APPLICABLE)

AGE / OF



From: Director, Natural Resources and Environmental Affairs

Division, Marine Corps Base, Camp Lejeune

To: Base Maintenance Officer, Marine Corps Base, Camp Lejeune

Subj: WASTE OIL STORAGE TANKS; ANALYSIS- OF-

Ref: (a) BO 6240.5

Encl: (1) JTC Environmental Consultants, Inc., Report #87-247

(2) JTC Environmental Consultants, Inc., Report #87-247

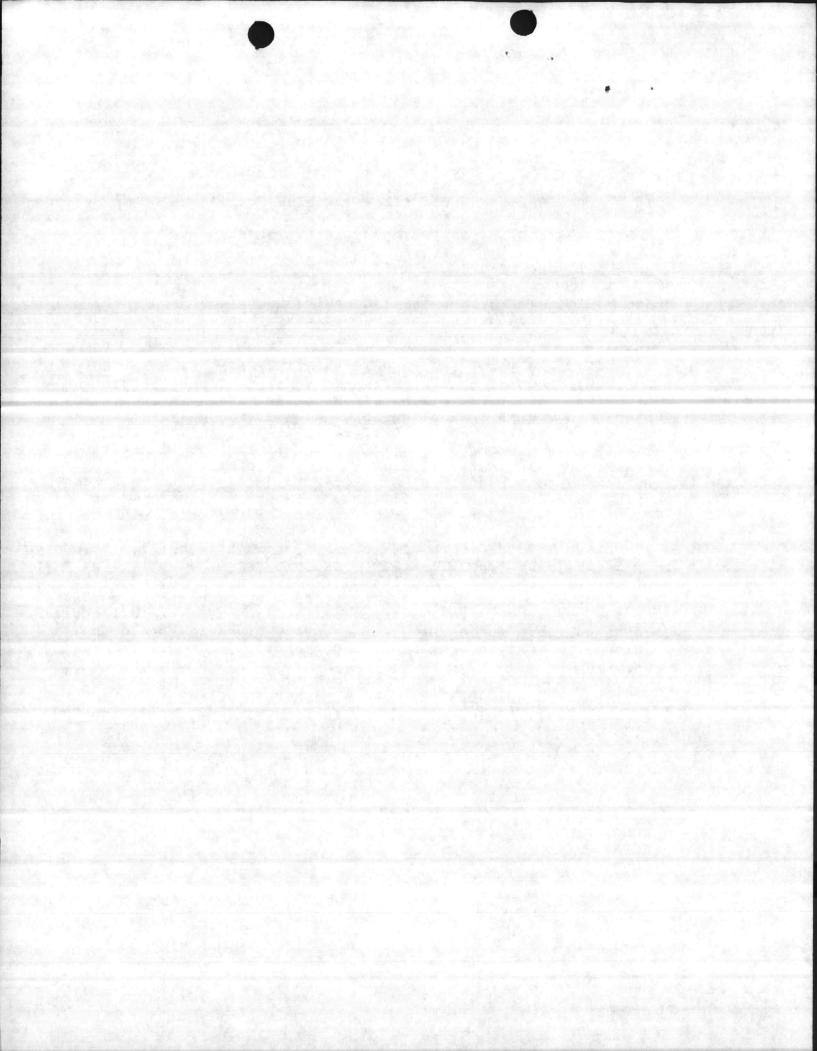
1. On 28 May 1987, the four waste oil storage tanks at Holcomb Boulevard, two of the three tanks at Marine Corps Air Station, New River, and three of the six tanks at Tarawa Terrace, were sampled by NREAD. Sample numbers 87-49 through 87-52 are the Holcomb Boulevard tanks S-888, S-889, 8-890, and S-891, respectively. Sample number 87-53 is the Marine Corps Air Station, New River tank in the middle and sample number 87-54 is the Marine Corps Air Station, New River tank closest to the crash crew. Sample numbers 87-55 through 87-57 are the tanks at Tarawa Terrace, STT-61, STT-62, and STT-63 respectively.

- 2. Based on data contained in enclosures (1) and (2), the contents of S-888, S-880 and STT-61 are specification used oil. The rest of the tanks, due to the levels of Total Organic Halogen (TOX), are regulated as a hazardous waste fuel by regulations outlined in the reference. The majority of the subject waste oil appears to be suitable for burning for recovery of energy based on information provided by Oldover Corporation, Aquadale, North Carolina.
- 3. It is recommended that the subject oil be turned in to DRMO for disposal. Point of contact is Danny Sharpe, extension 2083.

J. I. WOOTEN

Copy to: DRMO AC/S, FAC EC&MS (2)

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Partial Results

JTC DATA REPORT # 87-247

LABORATORY ANALYSIS ON NAVAL SAMPLES

CONTRACT #N62470-86-C-8754

CASE 42

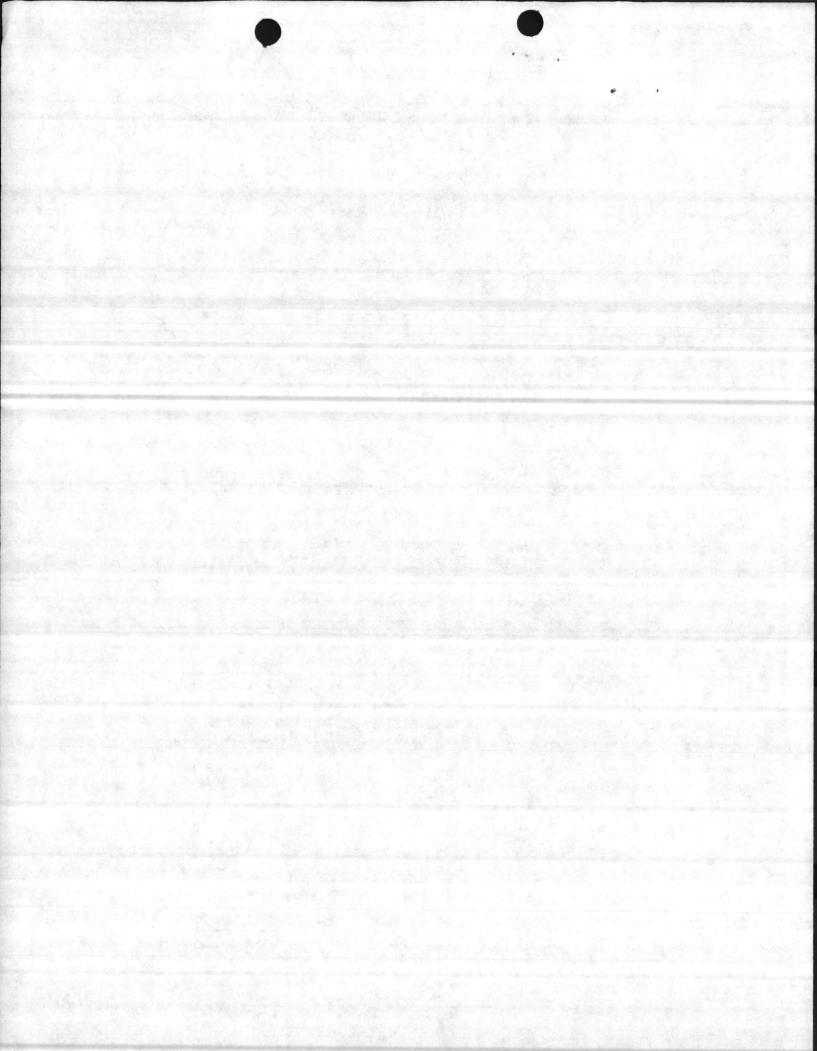
#### PREPARED FOR:

DEPARTMENT OF THE NAVY
ATLANTIC DIVISION
NAVAL FACILITIES ENGINEERING COMMAND
NORFOLK, VIRGINIA 23511-6287

#### PREPARED BY:

JTC ENVIRONMENTAL CONSULTANTS, INC. 4 RESEARCH PLACE, SUITE L-10 ROCKVILLE, MARYLAND 20850

JULY 6, 1987



5 8	pocacion:	- Camp Le	eune		Dod			COLOR		
	Date: 7-	1	Case No.		bate of to Nava.	Receipt:	es Engineer	_ Turnarou	nd: <u>routi</u>	ne virg
	SAMPLE	JTC SAMPLE	10.4					hase.		
	1 D	ID	Water %	.55+W	Viscositu elæ°F, sus	RDI	TOX	1 - 1 - 1980	t Sp. Gravita	1150 Fm
4	87 - 49	61-0305	19.5	19.5	93.6	15,550	< 0.05	N.O.	4/m  -	9/1
0	87-50	61-0306	13.5	20.0	100.8	16,500	0.20	boiled at 70°	*	0,9
1/2	87-51	61-0307	17.6	24.0	103.8	15,500	<0.05	boiled at 50 N.O.		
168-5	87-52	61-0308	.0.76	0.80	53.0	Marrie de la S	486.74	booked at 45	Control of the second	0.90
-	87-53	61-0309	8,4	13.51	100,8	19,300	0.12	-	.0.73	0.88
1.	87-54	61-0310	8.1	13.0		17,500	0.16	40	0.73	0.93
19	87-55)	61-0311	18.4		56.1	17,500	0,25	35	0.75	0,88
N			10.7	23.0	97,0	15 m	A 10	N-0.	400 27 100	

97.0

104.6

120.2

15,000

16,650

15,100

17.5

22.0

'O. = not observed top layer bottom layer

61-0312

61-0313

12.0

19.6

TAUK STT-62

87-57

\* sample consisted of only one oil layer

0.13

0.22

<0.05

N-0.

boiled at 45°

40

N.O.

boiled at 45°

0,76

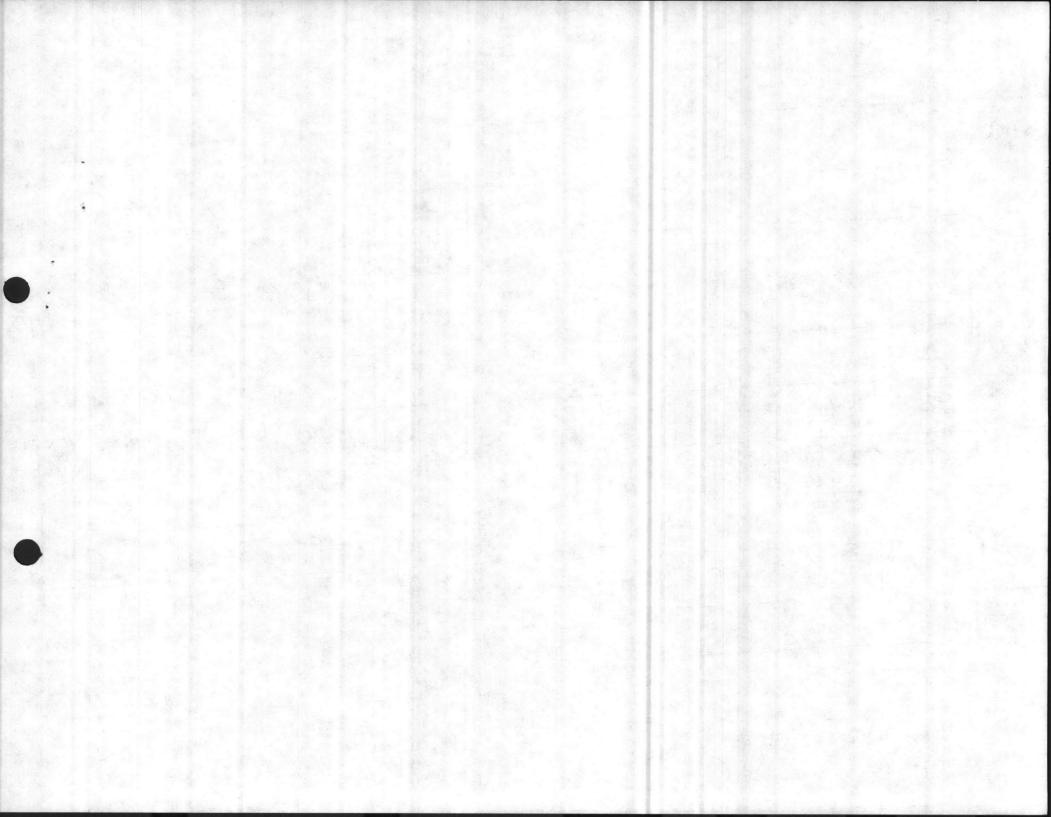
0.73

0.76

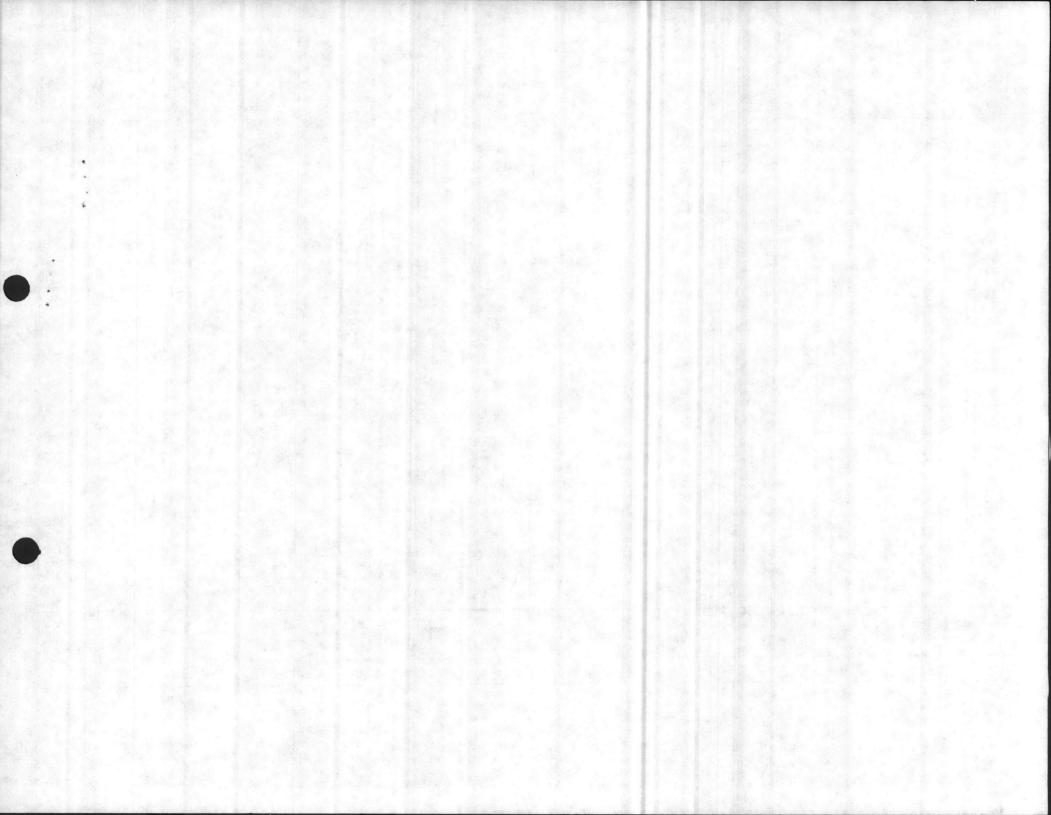
0.98

0.89

0,98



Location:_	Camp Le	eune.		Date of Red	ceipt: 6-	-5-87	Turnaround	: routi,	ie.
Date: 7-6	-87 ca	se No. 42	2	to Naval I	Facilities	Engineeri	ng Command	. Norfolk,	Virginia
JTC Data Re	eport No	7-247	Table	3	Water	Phase Co	moosite		
NAVY	JTC				ANALYSIS	PARAMETER	mposico		
SAMPLE	SAMPLE ID	TOX	Phenols mg/L-	VOA ,	As ug IL	Cd ug/L	Cr ug/L	Pb ug/L	
87-49/ 57	61-0305/ 61-0313	814	6.8	see attached sheet	498	<20	72	155	
composite		^				•			
	49						::- : ::::::::::::::::::::::::::::::::		
\$ 85 Ex.									





# C Environmental Consultants, Inc.

# PRIORITY POLLUTANT NALYSIS DATA SHEET

## VOLATILE FRACTION

JTC SAMPLE # 61-0305/0313	Composite No. NF-61#42
CLIENT SAMPLE # 87-49787	DETECTION LIMIT 500 ug/L
METHOD NO. 626	DETECTION LIMIT 500 ug/L

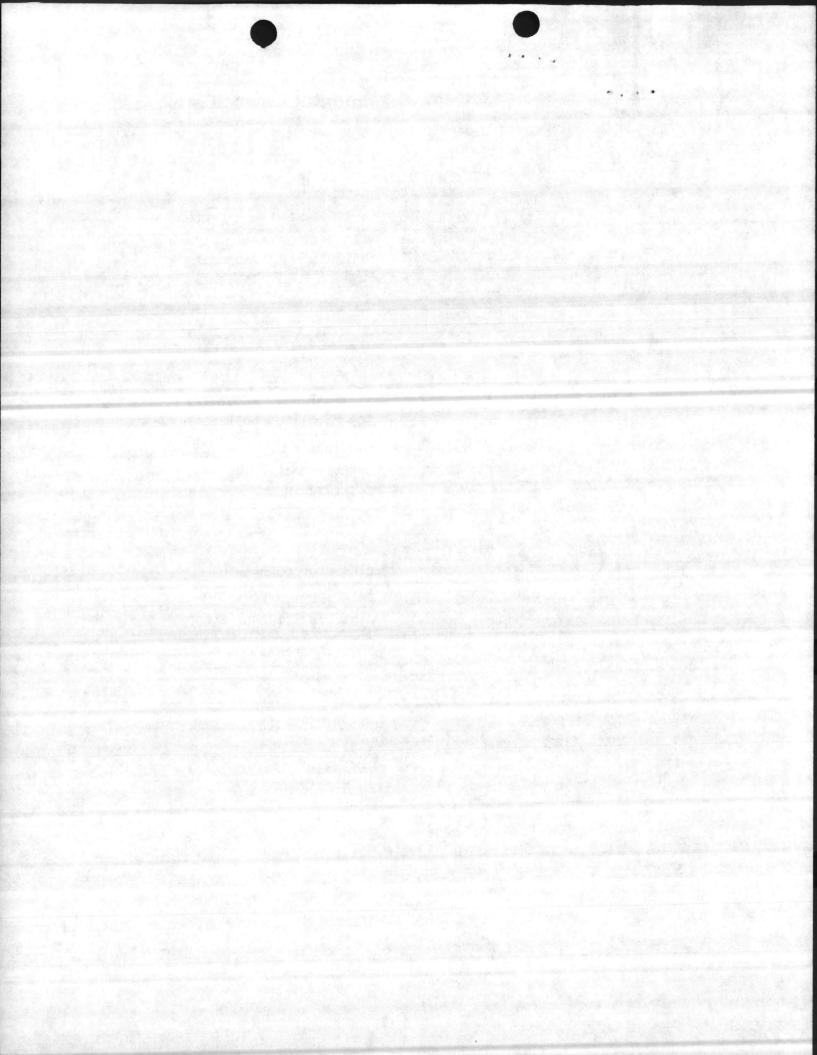
PARAMETER ·	RESULT
	ug/L
acrolein	ND
acrylonitrile	ND
benzene 54	0 - 40-
carbon tetrachloride	ND
chlorobenzene	ИD
1,2-dichloroethane	ИD
1,1,1-trichloroethane 2	30*: NB
1,1-dichloroethane	,ND
1,1,2-trichlordethane	ND
1,1,2,2-tetrachloroethane	ND
chloroethane	ИD
2-chloroethylvinylether	N,D
chloroform	ND
1,1-dichloroethylene	ND
1,2-trans-dichloroethylene	ND

,PARAMETER	RESULT ug/L
1,2-dichloropropane	ND
1,3-dichloropropylene	ND
ethylbenzene	110* 40-
methylene chloride	ND
methyl chloride	ND
methyl bromide	ND
bromoform	· ND
dichlorobromomethane	ND
trichlorofluoromethane	· ND
dichlorodifluoromethane	ND
chlorodibromomethane	ND
tetrachloroethylene	ND
toluene	99'0 -NB
trichloroethylene	ND
vinyl chloride	ND
xylenes	620 ND

Acetone 70,000 xy MEK (2-Boromone) 13,000 MIBK (4-menty) 1200

1,1,2-Trichlerotrifluoroethane present, concentration not a MD = NOT DETECTED

= BELOW DETECTION LIMIT



I dendum

JTC DATA REPORT # 87-247

LABORATORY ANALYSIS ON NAVAL SAMPLES

CONTRACT #N62470-86-C-8754

CASE . 42

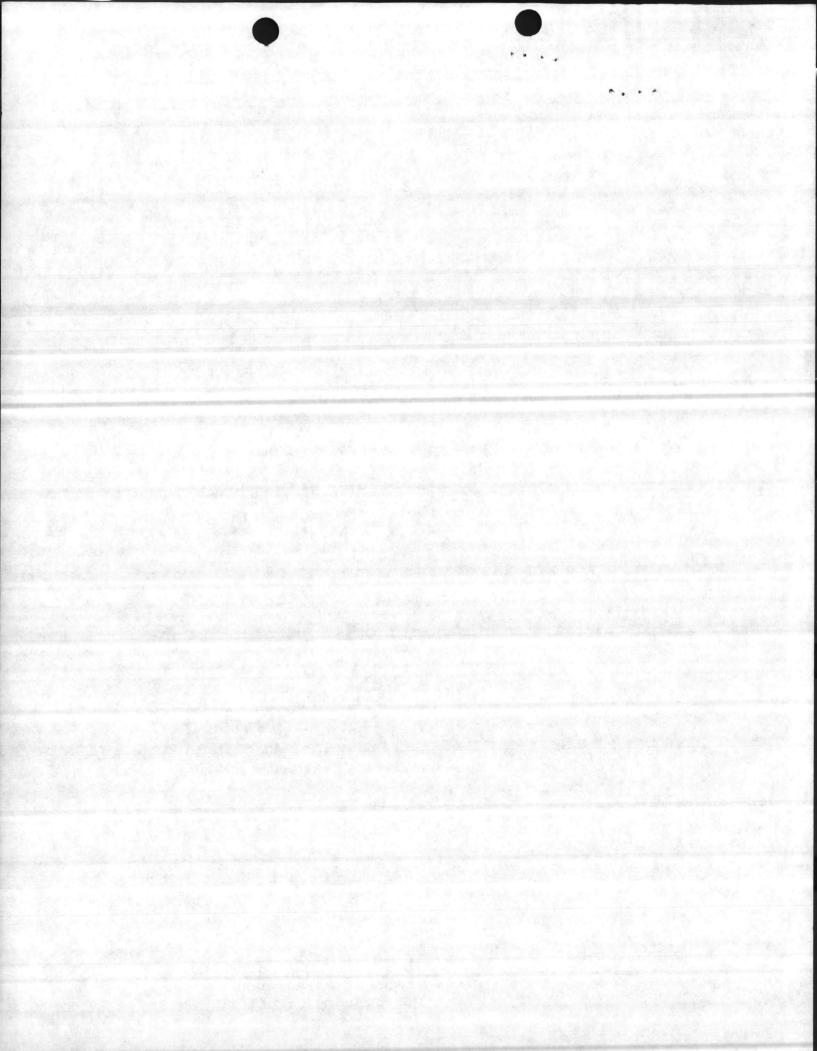
#### PREPARED FOR:

DEPARTMENT OF THE NAVY
ATLANTIC DIVISION
NAVAL FACILITIES ENGINEERING COMMAND
NORFOLK, VIRGINIA 23511-6287

#### PREPARED BY:

JTC ENVIRONMENTAL CONSULTANTS, INC. 4 RESEARCH PLACE, SUITE L-10 ROCKVILLE, MARYLAND 20850

JULY 8, 1987



AND DESCRIPTION OF THE PERSON	eport No. 8	1- JA ]	_ Table					
NAVY	JTC .				ANALYSIS	PARAMETER		
SAMPLE	SAMPLE	As mg/kg	Cd. mg/kg	Cr mg/kg	Pb			
37-49	61-0305		2,0	1,7	mg/kg 75	÷		
							0;	
7		*		•			4. 2.1	
							13 13 13	
							and the second s	
<b>)</b> ;	way.							(C)
							124	- 19°

Prom: Director, Natural Resources and Environmental Affairs

Division, Marine Corps Base, Camp Lejeune

To: Base Maintenance Officer, Marine Corps Base, Camp Lejeune

Subj: WASTE OIL STORAGE TANKS; ANALYSIS- OF-

Ref: (a) BO 6240.5

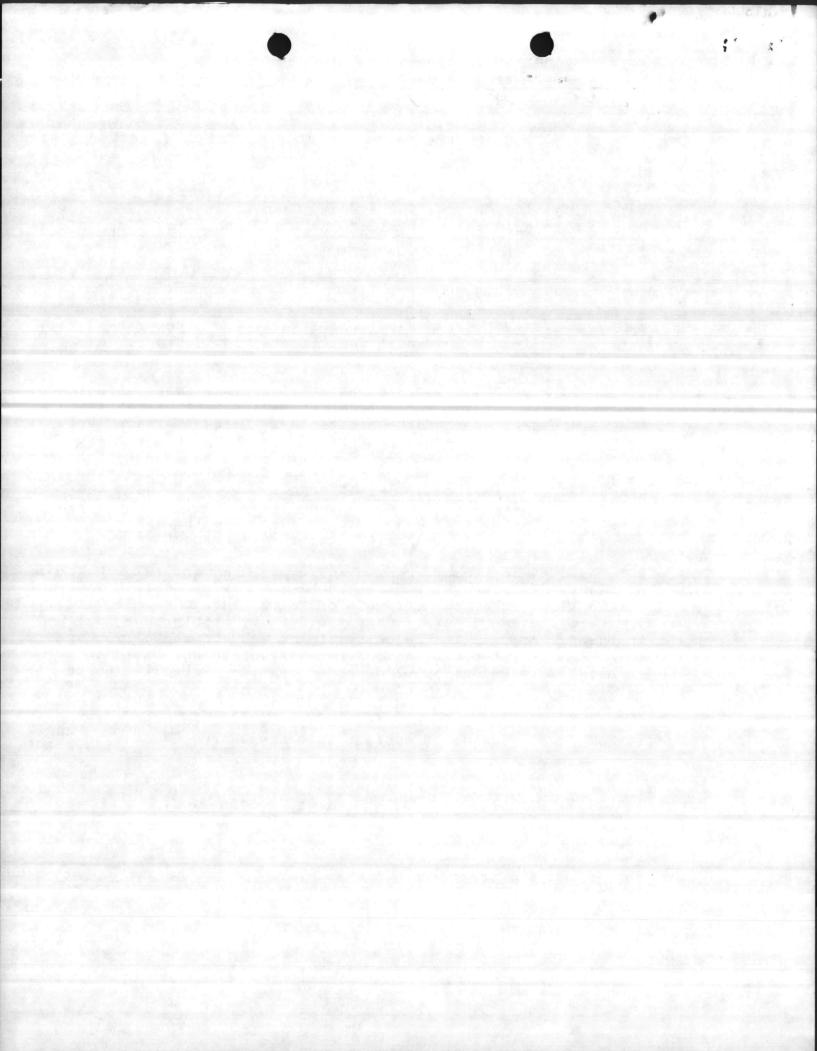
Encl: (1) JTC Environmental Consultants, Inc., Report #87-247

(2) JTC Environmental Consultants, Inc., Report #87-247

- 1. On 28 May 1987, the four waste oil storage tanks at Holcomb Boulevard, two of the three tanks at Marine Corps Air Station, New River, and three of the six tanks at Tarawa Terrace, were sampled by NREAD. Sample numbers 87-49 through 87-52 are the Holcomb Boulevard tanks S-888, S-889, S-890, and S-891, respectively. Sample number 87-53 is the Marine Corps Air Station, New River tank in the middle and sample number 87-54 is the Marine Corps Air Station, New River tank closest to the crash crew. Sample numbers 87-55 through 87-57 are the tanks at Tarawa Terrace, STT-61, STT-62, and STT-63 respectively.
- 2. Based on data contained in enclosures (if and (2), the contents of S-888, S-880 and STT-G1 are specification used oil. The rest of the tanks, due to the levels of Total Organic Halogen (TOX), are regulated as a hazardous waste fuel by regulations outlined in the reference. The majority of the subject waste oil appears to be suitable for burning for recovery of energy based on information provided by Oldover Corporation, Aquadale, North Carolina.
- 3. It is recommended that the subject oil be turned in to DRNO for disposal. Point of contact is Danny Sharpe, extension 2083.

J. I. WOOTEN

Copy to: DRMO AC/S, FAC EC&MS (2)



#### Partial Results

JTC DATA REPORT # 87-247

LABORATORY ANALYSIS ON NAVAL SAMPLES

CONTRACT #N62470-86-C-8754

CASE 42

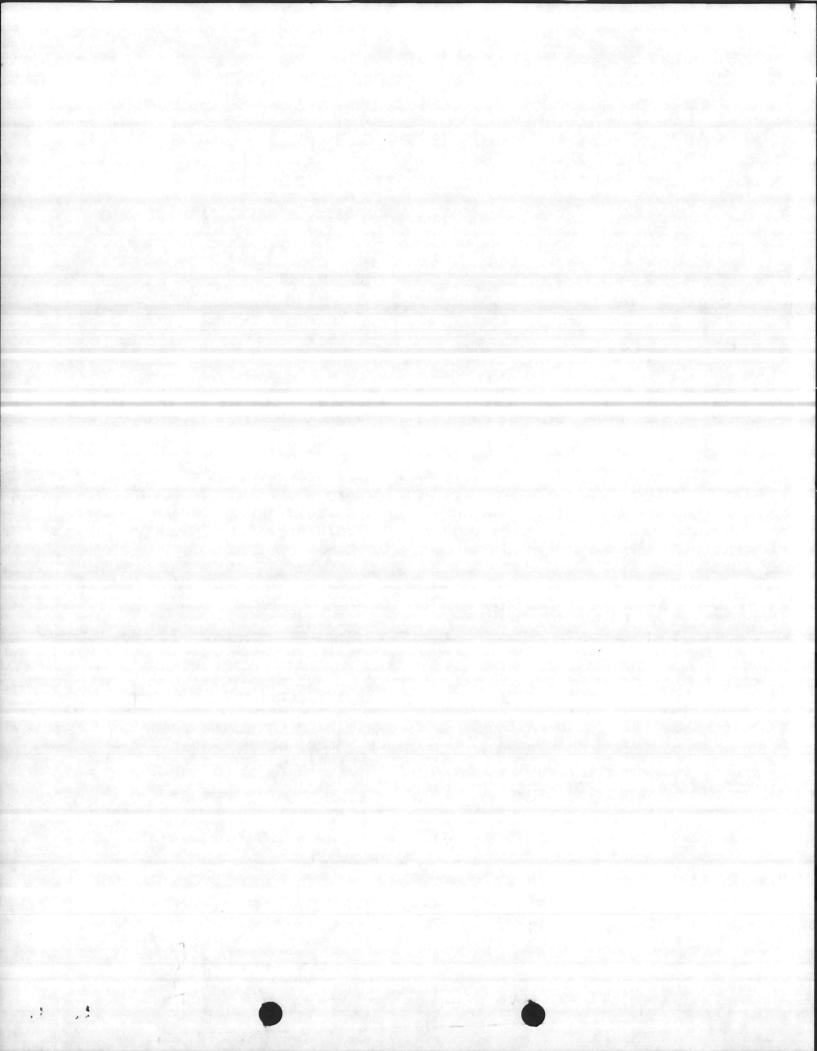
#### PREPARED FOR:

DEPARTMENT OF THE NAVY
ATLANTIC DIVISION
NAVAL FACILITIES ENGINEERING COMMAND
NORFOLK, VIRGINIA 23511-6287

#### PREPARED BY:

JTC ENVIRONMENTAL CONSULTANTS, INC. 4 RESEARCH PLACE, SUITE L-10 ROCKVILLE, MARYLAND 20850

JULY 6, 1987



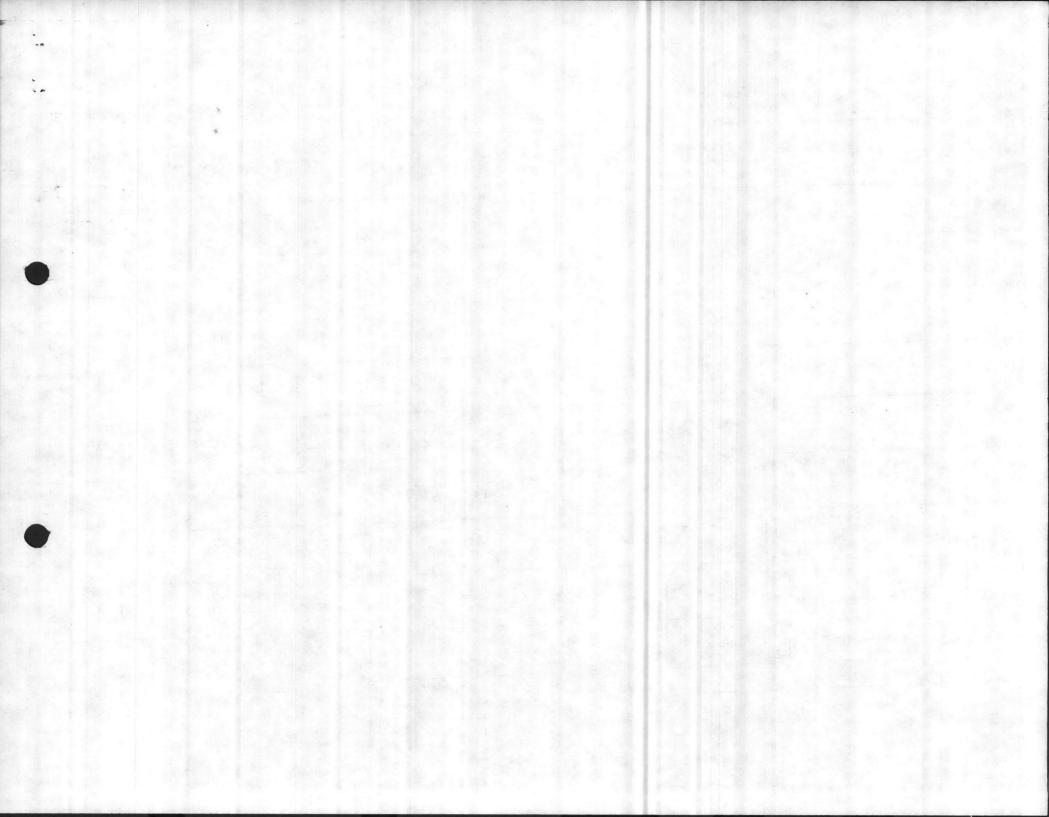
Date 7-1 ST	Date of Receipt: 65-87 Turnaround: routine
	to Naval Facilities D
JTC Data Report No. 87-247 Table_	

	NAVY	JTC	T		48.5		Oil P	hase.		
	SAMPLE	SAMPLE	Water			ANALYSIS				
	ID	ID	70	.852 W	Viscositu elæ°F, sus	Fer 16.	70X	Flashpoin	t Sp. Gravita	Sp. Gravit
	87 - 49	61-0305	19.5	19.5	93.6	15,550		N.O.	9/11	9/m
	1 87-50	11-6201	12-		1.	1000	10.05	boiled at 70°	0,73	0.92
7		61-0306	13.5	20.0	100.8	16,500	0.20	N.O. boiled at 50	0,77	
W.	87-51	61-0307	17.6	24.0	103.8	15,500	<0.05	. N.O.	0.770	0.91
	87-52	61-0308	.0.76	0.80	53.0			·	and the second	0.96
	97:50	// 4210			0010	19,300.	0.12	35	.0.73	0.88
+	87-53	61-0309	8,4	13.5	100.8	17,500	0.16	40	0.73	0.93
	87-54	61-0310	8.1	13.0	56.1	17,500	A 35	2-		0.15
1	87-55	(1 0011					0,25	35	0.75	0.88
+	87-55	61-0311	18.4	23.0	97.0	15,000	0.13	N=0.	0,76	0.98
1	87-56	61-0312	12.0	17.5	104.6	16,650	0.22	40	-	
1	87 57	11 00			Ψ, Ψ		0122	70	0.73	0.89
1	87-57	61-0313	19.6	22.0	120.2	15,100	<0.05	N.O. boiled at 45°	0.76	0,98
	'O. = not	= observed			*	A SA		- Sirancis		

<sup>&#</sup>x27;O = not observed

top layer b = bottom layer

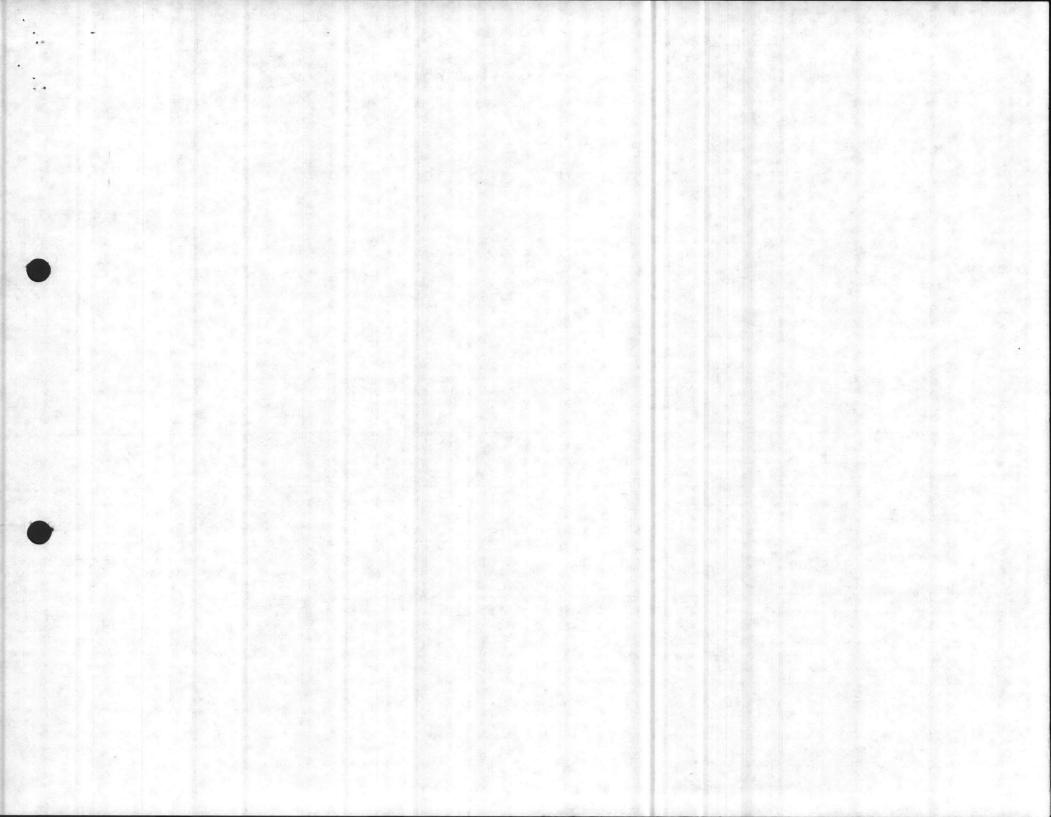
\* sample consisted of only one oil layer



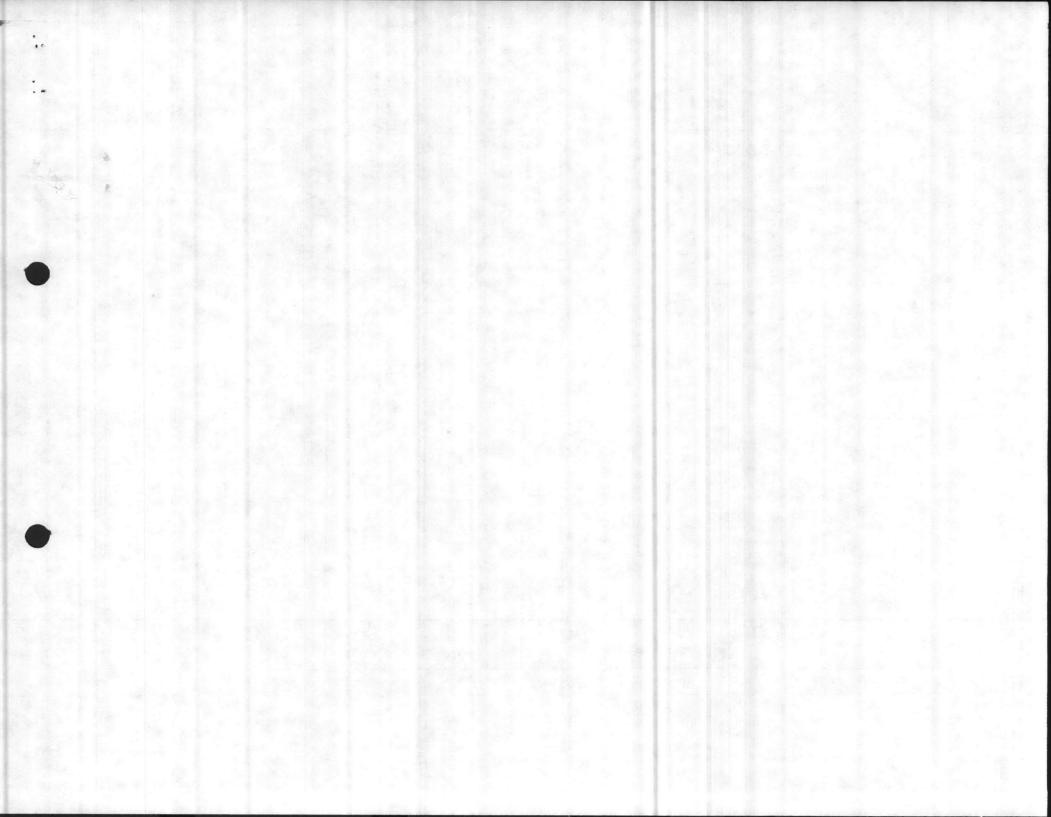
ic Environmental Consultants, Inc.

Location:_	Camp Lejei	une.		Date of Re	ceipt: 6-	5-87	Turnaround:	routin	e					
Date: 7-6	-87 ca	se No. 4					ng Command,							
JTC Data Re	eport No. 8					Phase								
NAVY	JTC		ANALYSIS PARAMÉTER											
SAMPLE	SAMPLE ID	PCB uglg	As mg 1 kg	Cd mg/kg	Cr mg/kg	Pb mg/kg								
87-49	61-0305	·<5	NA	NA	NA	. NA								
87-50	61-0306	<b>?</b> 5	<b>&lt;</b> 5	<1	<0.75	30								
87-51	61-0307	<b>&lt;</b> 5	<b>&lt;</b> 5	1.1	2,2	59								
87-52	61-0308	<b>&lt;</b> 5	<i>&lt;</i> 5	<1	1.4	23			en e					
87-53	61-0309	<b>&lt;</b> 5	<i>&lt;</i> 5,	< 1	1.6	35								
87-54	61-0310	< 10	<b>&lt;</b> 5	<1	2.6	24								
87-55	61-0311	<5	<b>&lt;</b> 5	< 1	1.3	26	·							
87-54	61-0312	<b>&lt;</b> 5	<i>&lt;</i> 5	< 1.	<0.75	8.2								
87-57	61:0313	<5	<i>&lt;</i> 5	<1	<0.75	28								
	amilable x	cerite 1	will be re	202-4-1		L - 1 å -								

· not available, results will be reported in a report addendum



occation: Camp Lejeune Date of Receipt: 6-5-87 Turnaround: routine Case No. 42 Cate: 7-6-87 to Naval Facilities Engineering Command, Norfolk, Virginia ITC Data Report No. 87-247 Table 3 Water Phase Composite VAVY ANALYSIS PARAMETER JTC SAMPLE SAMPLE TOX Phenols As Pb VOA Cr ID ID mg/Luglh ug/L uglh See 61-0305/ 87-49/ 155 72 <20 attached 498 61-0313 sheet





# C Environmental Consultants, Inc.

## PRIORITY POLLUTANT ANALYSIS DATA SHEET

## VOLATILE FRACTION

JTC SAMPLE # (01-0305/0313 COM	POSIR PROJECT NO. NF-61#42
CLIENT SAMPLE # 8 7-49 787-57  Compa  METHOD NO. 624	DATE RECEIVED 615187
METHOD NO. 624	DETECTION LIMIT 500 ug/L

PARAMETER	RESULT
	ug/L
acrolein	ND
acrylonitrile	ND
benzene 54	0 - 40
carbon tetrachloride	ND
chlorobenzene	ND
1,2-dichloroethane	ND
1,1,1-trichloroethane 2	30* NB
1,1-dichloroethane	ND
1,1,2-trichlorcethane	ND
1,1,2,2-tetrachloroethane	ND
chloroethane	ND
2-chloroethylvinylether	ND
chloroform	ND
1,1-dichloroethylene	ND
1,2-trans-dich oroethylene	ND ·
*** ***	

PARAMETER	RESULT ug/L
1,2-dichloropropane	ND
1,3-dichloropropylene	, ND
ethyl benzene	110* 40
methylene chloride	ND
methyl chloride	ND
methyl bromide	ND
bromoform	ND ND
dichlorobromomethane	ND
trichlorofluoromethane	ND.
dichlorodifluoromethane	ND
chlorodibromomethane	ND
tetrachloroethylene	ND
toluene	99'0 -NB
trichloroethylene	ND
vinyl chloride	ND-
xylenes	620 ND

Acetone 70,000 xyl

MEK (2-B. mone) 13,000

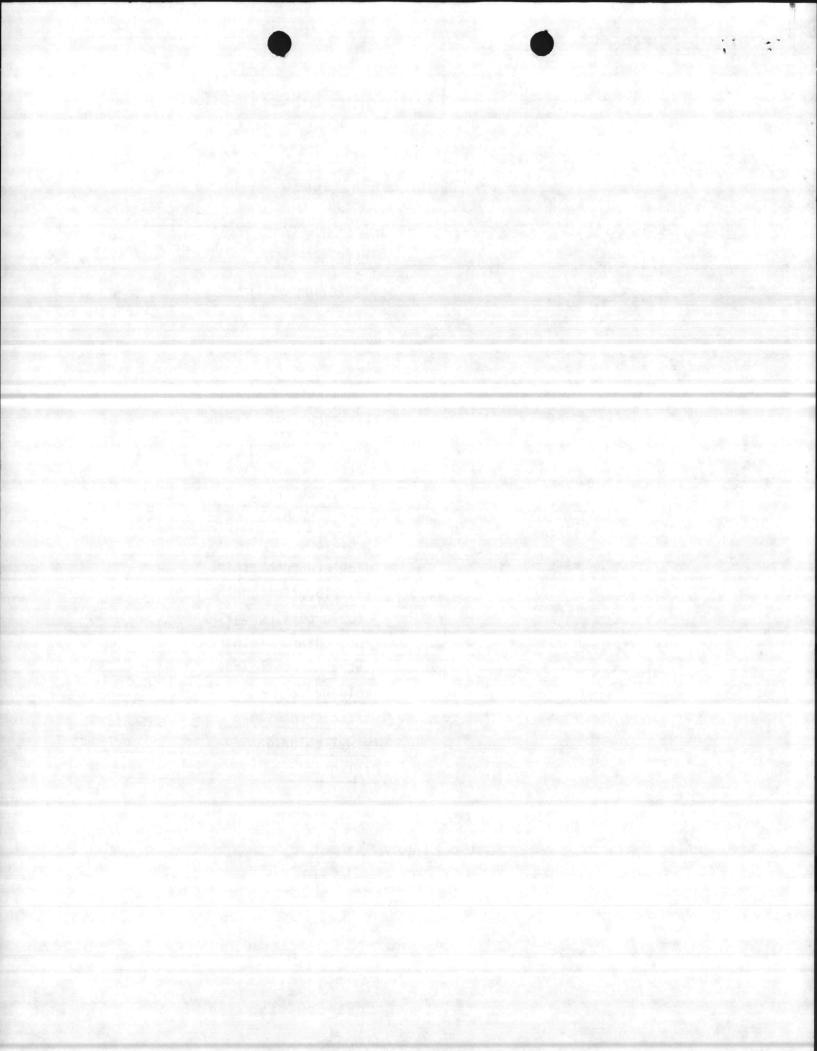
MIBK (4-mont jl-2 pentanone) 1200

1,1,2-Trichtarotri Huoroethane

ND = NOT DEFECTED (Freen)

= BELOW DETECTION LIMIT

present, concentration not a



#### Addendum

JTC DATA REPORT # 87-247

LABORATORY ANALYSIS ON NAVAL SAMPLES

CONTRACT #N62470-86-C-8754

CASE . # 42

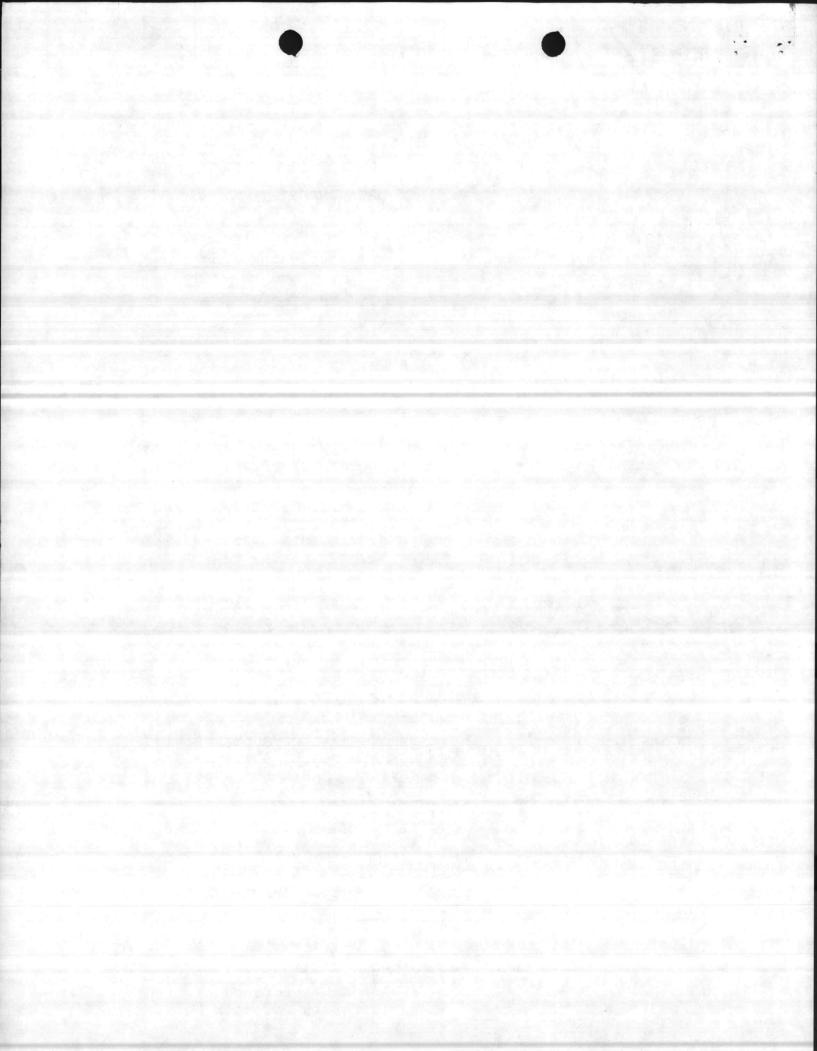
#### PREPARED FOR:

DEPARTMENT OF THE NAVY
ATLANTIC DIVISION
NAVAL FACILITIES ENGINEERING COMMAND
NORFOLK, VIRGINIA 23511-6287

#### PREPARED BY:

JTC ENVIRONMENTAL CONSULTANTS, INC. 4 RESEARCH PLACE, SUITE L-10 ROCKVILLE, MARYLAND 20850

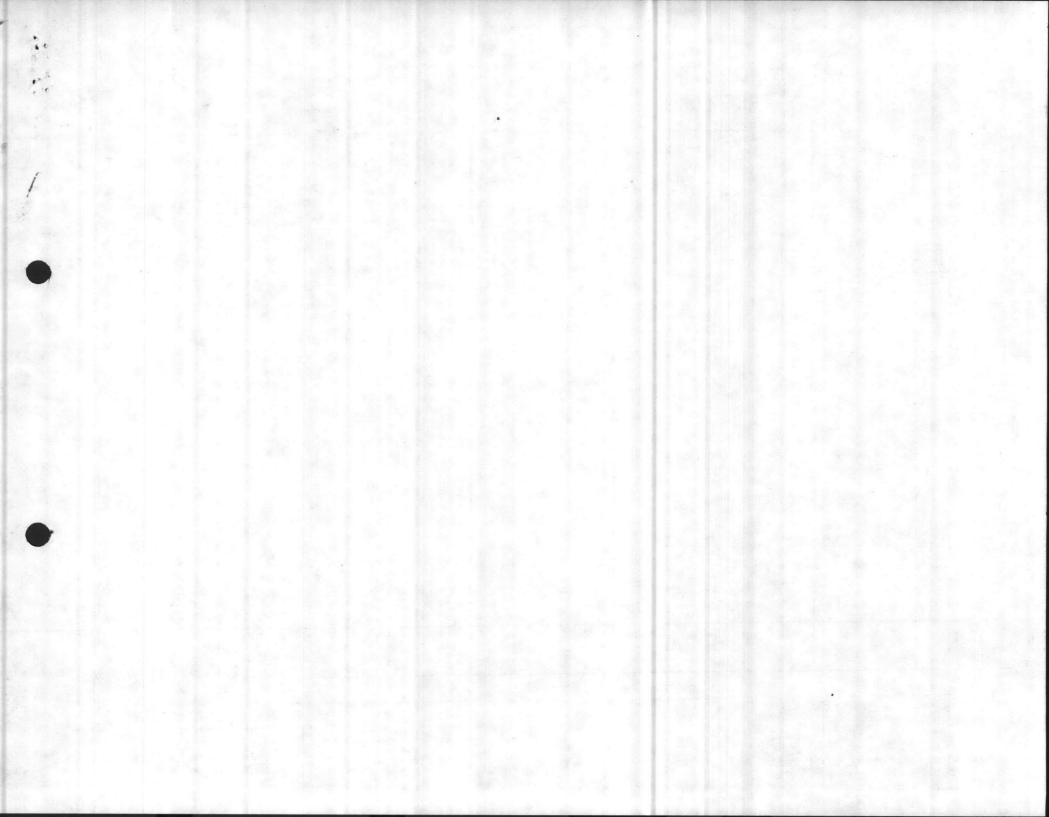
JULY 8, 1987



Date: 7-8-87 Case No. 42 Add to Naval Facilities Engineering Command, Norfolk, Virginia TC Data Report No. 87-247 Table\_\_\_ NAVY JTC ANALYSIS PARAMETER SAMPLE SAMPLE As Pb ID ID mg/kg mg/kg 61-0305 15 87-49 2,0 75

Date of Receipt: 6-5-87 Turnaround: routine

ocation: Camp Le jeune



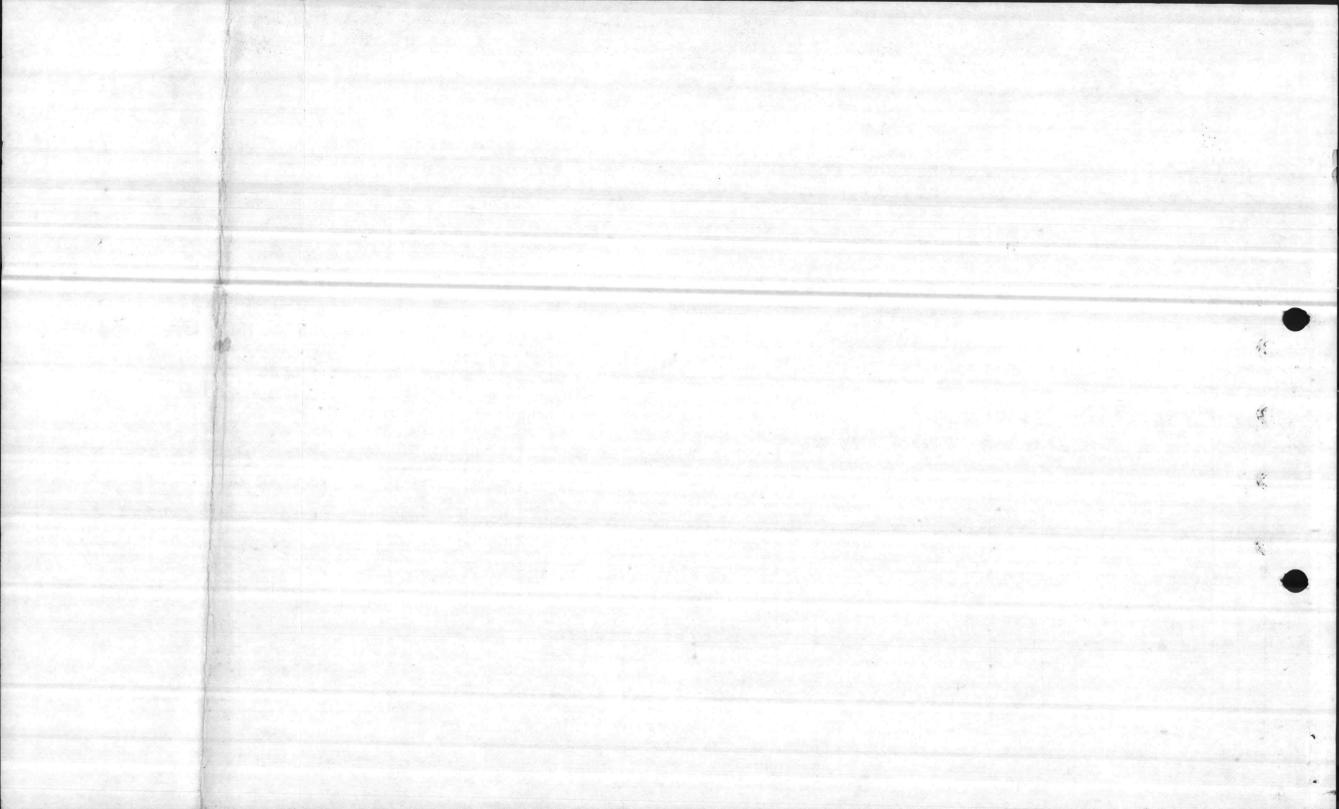
ON (Type, Symbol, Date, Subject, etc.)
Received 14 Sep 87
ABOUT (Date): OLLOWING ORGANIZATION FOR
ess
SIGNATURE AND DATE

OCT 80 65-R (DLSC O/P, Jun 85) EDITION OF MAR 78

NOTIFICATION FORM



3			V			DELI	VERY ORDER INVENTOR	Y (NON PCB)							PIC	CKUP R	EPORT	
GENERAT	OR V	1AR	INE CORPS L	BASE			NC6170022	2580		DLA 2	NTRACT	NUMBER 87-D	-0045	SHADE	D PORTIONS TO BE	COMPLE	TED BY CONTRACTING	OFFICE
COMPLET	FADDE	2538	IP LEJEUNG		2000	/2	LE JEYNE							CONTRACT	NUMBER		DELIVERY ORDER NUM	48EH
COR			E66ERS	700	200		PICKUP LOCATION # 5 891	TOUVER	CO THILL	e Tate!	TIBL	UV STA	7 9	AUTHORIZE	TRANSPORTER NA	ME	EPA NUMBER	
COMMEDIC	LAI DU	ONE	HARED				AUTOVON PHONE NUMBER 454-5613	15652	of IANK	0//0/	///	1000		TSDF NAME	8.4 militari		EPA NUMBER	The second second
GENERAT	OR REC	DUEST	-56/3 / 56 NUMBER	52			RIC CODE SWA						· 10 / 25	AUTHORIZE	D TRANSPORTER SIG	SNATUR	E	
DATE SEN	T TO C	ONTR					DAYE RECEIVED BY CONTRACT	HIG						AUTHORIZE	CONTRACTING OF	FICERS	REPRESENTATIVE (COR	N .
10	2		3 NSN	4	DTID	7 - B.S.	5 ITEM NAME	6 STORAGE CONTAINER	7 STORAGE	8 QUANTITY	9	10 PRICE	11	12 EPA WASTE	13 PICKED UP		14 PICKUP MANIFEST NUMBER	15 DATE
IN		FIX	LSN	DODAAC	DATE	SERIAL	US DOT DESCRIPTION	DRUM NUMBER	LOCATION		UNIT	PRICE	THUOMA	CODE	QUANTITY	UNIT	LINE CODE	PICKED UP DDMMYY
4743	00	AA	9150-00-016-WASTE	M 93 182	7245	0005	SEE ATTACHED SAMPLE 87-55	GROUND	STT-61	12,500	GL							
47473	00	AB	9150-00-016-WASTE	493182	7245	1006	SEE ATTACHED		FARAWA TERROCE STT-62	12,500	GL				TO THE REST			
4743	20	20	9150-00-016 =WASTE	M 93182	7245	0003	CAMPLE 87-53	4	HOLCOMO BLUD 5-889	17.500	GL							
4743 4742 4742 4742 4742 4743	20	An	9150-00-016-WASTE	M93182	7245	1004	SEE ATTACHED SAMPLE 87-52	11 11	5-891	17,500	GL					i des		
		-		100	1 1 M		New York											
	1																	
			*			To Consider								Part 1				
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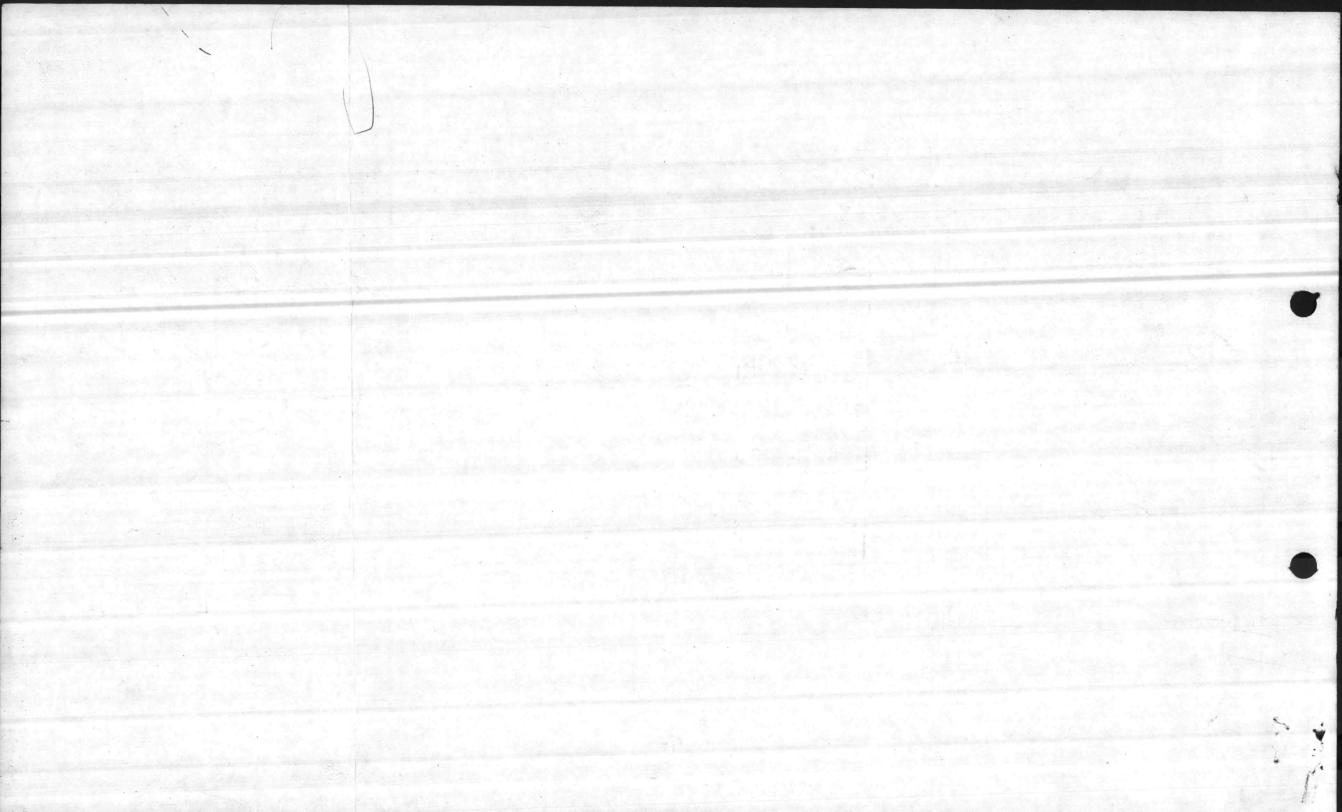


20149

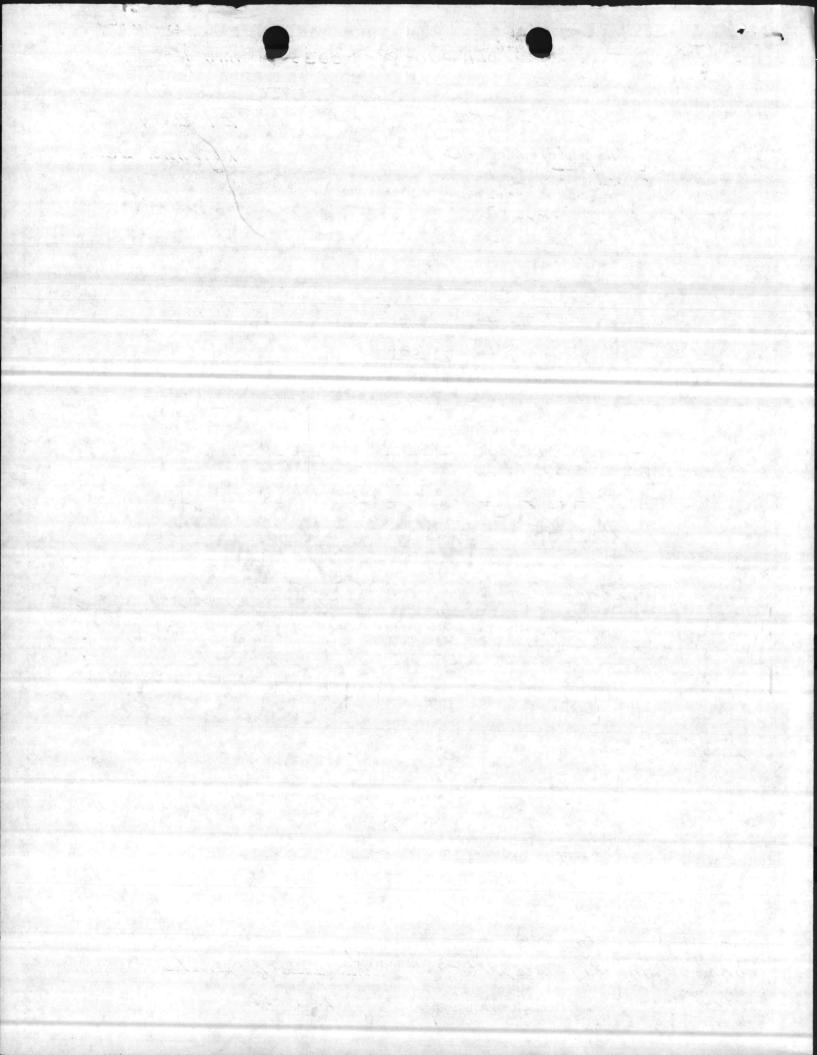
COLL ECTION SI	JMMARY REPORT	CONTRACT NO.	DELIVERY ORDER NO.		
		DLA 200-88-D-003		- 11 -	
			cing days from the time that the contractor leave	es the	
collection site. The add		fficer is included on Page 1 of the encl			
A. DESCRIPTION OF	Actual location of chemic	eas als	2. RIC \ 21/4		
CHEMICAL	CAMP LE EUNE	DASC	ST-61 S \ 20 14 ST-64 3. Accountable DRMO		
COLLECTION SITE	10 . 1	4/0	LEJEUN E		-
	CAMP NEJ EUNE	,10.0			
		SCOLLECTED. (Attach copy of DD- state why and attach a description or	250 or DRMS-1697, Pickup Report, as applicate copy of annotated inventory.	)ie	
	y differences between the quanit ditional documents as necessary)		ity of chemicals shown in the contract and/or d	silvery	
					o
2. Please fill in the colum	ons describing the number of co	ntainers requiring overpacking, repacki	ng, draining,etc., if any.		
CLIN	ITEMS	QUANTITY	REMARKS		
		and the state of t			
· '					
	1. Date of contractor arrival	3. Please check either S (satisf	actory) or U (unsatisfactory) for each phase of	10.24	
C. EVALUATION	Year.	contractor's performance a	nd specify any problems and/or positive actions	S	U
	12-16-87	encountered, if any.		100	
OF	12-1401	a. Adequacy of Contractor/	COR briefing/notification	X	1
CONTRACTOR'S	2. Date of contractor depart	ure b. Adequacy of repackaging		X	
	1	c. Final clean—up and deco	ntamination	X	
PERFORMANCE	12-16-87	d. Safety of personnel		X	
		e. Number of trucks used		1	
				YES	NO
D. DOCUMENTATION F	RECEIVED Check each docu	ment received by PDO for filing	a. Manifest	X	
			b. Form DD 250 (or DRMS Form 1697)	X	
E DEMARKS INCLU	DE ANY SPECIFIC COMMENT	S VOLUMAY HAVE BEGARDING O	VERALL CONTRACTOR PERFORMANCE,	- 3 4	
ANY SUGGESTIONS	OR COMMENTS (on improvin	g this contract, COR letter, Summary I	report, etc.)		
1. Name of PDO submitti	ng report	3. COR Signature	1114	-	T refere
CAMP LEIN	NE NC DRM	O Bawa	ence & Sunter		
2. Printed or typed name	of COR	4. Date this report		e supposition	
HUNTER,	んん	11-1	17-87		Person college

There is the factor of the same igoa y named from Action Comments 

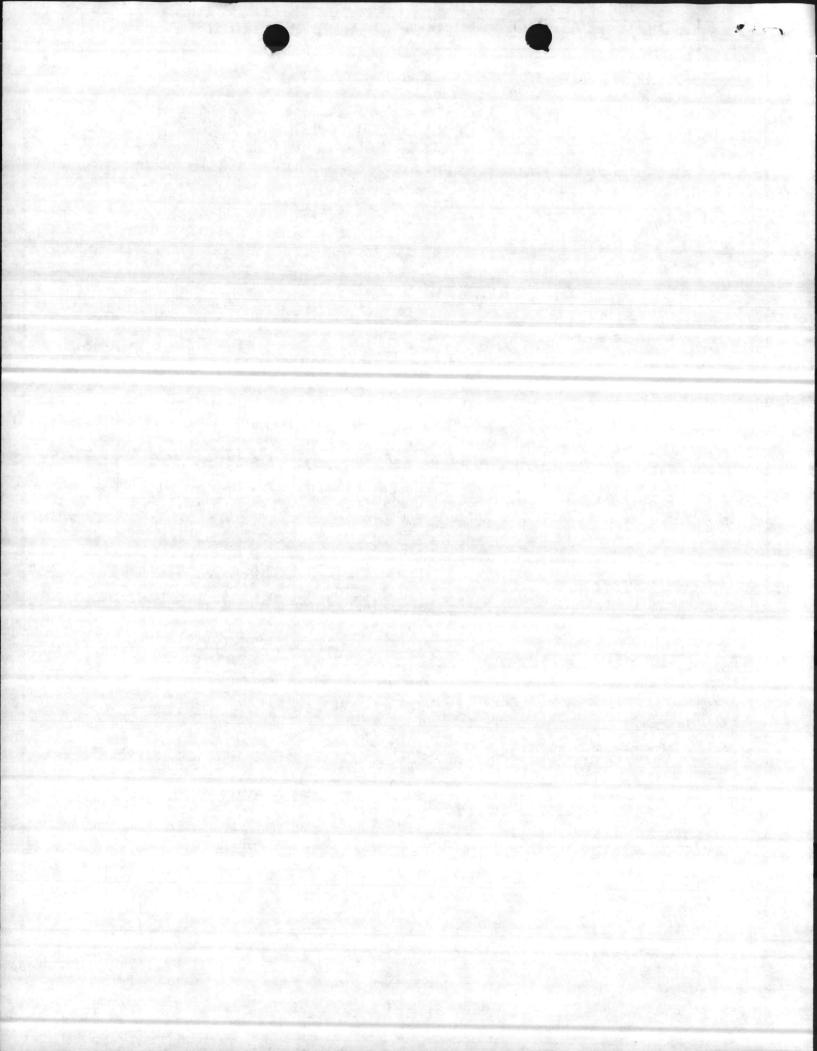
					DELI	VERY ORDER INVENTORY	(NON PCB)							PI	CKUP R	EPORT	
NERATOR	A a a'	1 3	ACE			PA NUMBER NC 61700	22580		DLA 2	TRACT	NUMBER 8-D-	0033				TED BY CONTRACTING	OFFICE
MPLETE AD	DRESS	ejeune, NC	28	542	- 21	LEIEUNE							BB D	RANSPORTER NA		DELIVERY DRIBER NON	AREH /
OR CT FO	3005	EGGERS		10		TANK \$ 5891 -	TANK# 889	9 - TANK	STT-61	-7	TANK S	TT-62	AUTHORIZED T	RANSPORTER NA	ME	EPA NUMBER THE DOS 9558 EPA NUMBER	8019
MANSERCIAL I	HONE N	EGGERS 1-5613/5	652		7 A 4	AUTOVON PHONE NUMBER	13/565	2-					TEDF NAME SWI	TRAMSPORTER SI		TND 03450	47141
NERATOR R	LO	NUMBER				SWA		A TORON					AUTHORIZED	Brian &	Jeegl	RENGESTATIVE COR	9
TE SENT TO	CONTR	ACTING '87				her attended by constant	7-/	5-87	8	19	110	155	012	PICKED UI			116
CLIN 5	UFFIX	3 NSM	DODAAC	DATE	SERIAL	US DOT DESCRIPTION	6 STORAGE CONYAINER DRUM NUMBER	STORAGE	QUANTITY	UNIT	PRICE	AMOURT	WASTE CODE	QUANTITY	UNIT	MANIFEST NUMBER	PICKED UP
172044 o	OLAA	a los and all la sets			0005	SEE ATTECHED SAMPLE 87-55	TONK About Get.	THERWA TEARAGE STEGI	12,500	G	2.95		FOOT +007	2,200	GL	D0149	12/16/8
7200A O	OAB	2150-00-011 Waste	M 93/82		000 6	SEE ATTACHED SANDE 87-55	Above Ged	TEARGOR 62	12,500	G			D00 /				
720AH 0	0 20	9150-00-011 1095/2	AM OT IX	7285	000 3	SEE ATTACHED SAMPLE 87-35 SEE ALLACHED	About God	Halcumb S-989 Halcum	17,500	G			1000		量		
720AA 0	OAD	9/50-00 011 WASTE	m 93/82	7245	000 4	SAMPLE 87-55	Above Cas		17,500	G	ļ						
22.00								201000000000000000000000000000000000000		-				- W. B			
	-																
	-							A section		-					+		
										1			2				
2-+	+												1				
- Transmission					-												
					- 4				Action and the Control of the Contro								-
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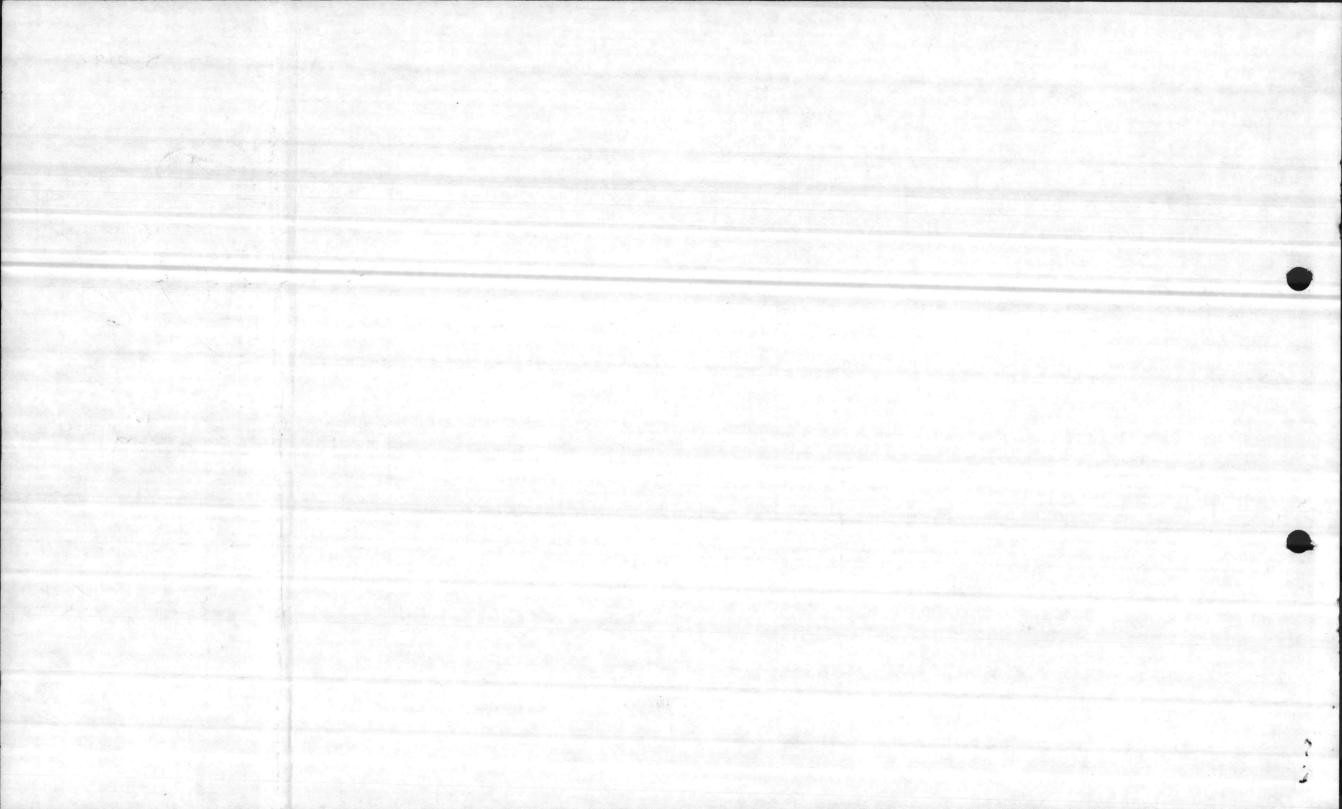
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C	COLLECTION SUN	MMARY REPO	TRACT NO. A 200-88-DOO	DELIVERY ORDER NO.		
		and submit it to the DRMS Contra	acting Officer within ten (10) work	king days from the time that the contractor leav osed contract and/or delivery order.	es the	
Michigan	DESCRIPTION OF CHEMICAL	1. Actual location of chemicals Manive Conps. L Camp Lejeune		2. AIC 24-2014		
	COLLECTION SITE			3. Accountable DRMO LEJEUNE, NC.		
B.			LLECTED. (Attach copy of DD— e why and attach a description or	250 or DRMS-1697, Pickup Report, as applicated to the second copy of annotated inventory.	ole	
		differences between the quanity of ional documents as necessary)	chemicals collected and the quant	ity of chemicals shown in the contract and/or o	elivery	
0	Close fill in the sale	describing the gumber of contribu	nors requiring oversacking reparking	no distribute of any		
2.	CLIN CLIN	ITEMS	QUANTITY QUANTITY	REMARKS	p3 11	
c.	EVALUATION	Date of contractor arrival	contractor's performance as	actory) or U (unsatisfactory) for each phase of nd specify any problems and/or positive actions	S	U
	OF	12-16-87	encountered, if any.	Joop Links de Vision		
	CONTRACTOR'S	2. Date of contractor departure	a. Adequacy of Contractor/ b. Adequacy of repackaging		X	
	PERFORMANCE	2	c. Final clean-up and deco	ntamination	X	
	PERFORMANCE	12-16-87	d. Safety of personnel e. Number of trucks used		2	
- Constant		(4.1)	G. Number of tracks ased		YES	NO
D.	DOCUMENTATION RE	CEIVED Check each documen	t received by PDO for filing	a, Manifest	X	
-				b. Form DD 250 (or DRMS Form 1697)	X	
	ANY SUGGESTIONS C	OR COMMENTS (on improving thi	s contract, COR letter, Summary f	Report, etc.)		
1. 1	Name of PDO submitting		3. COR Signature	6 // 7	1. d. 75 mg/	
2. [	Demo (And Printed or typed name of		4. Date this report	ence 6. Number resubmitted 2-10-87		
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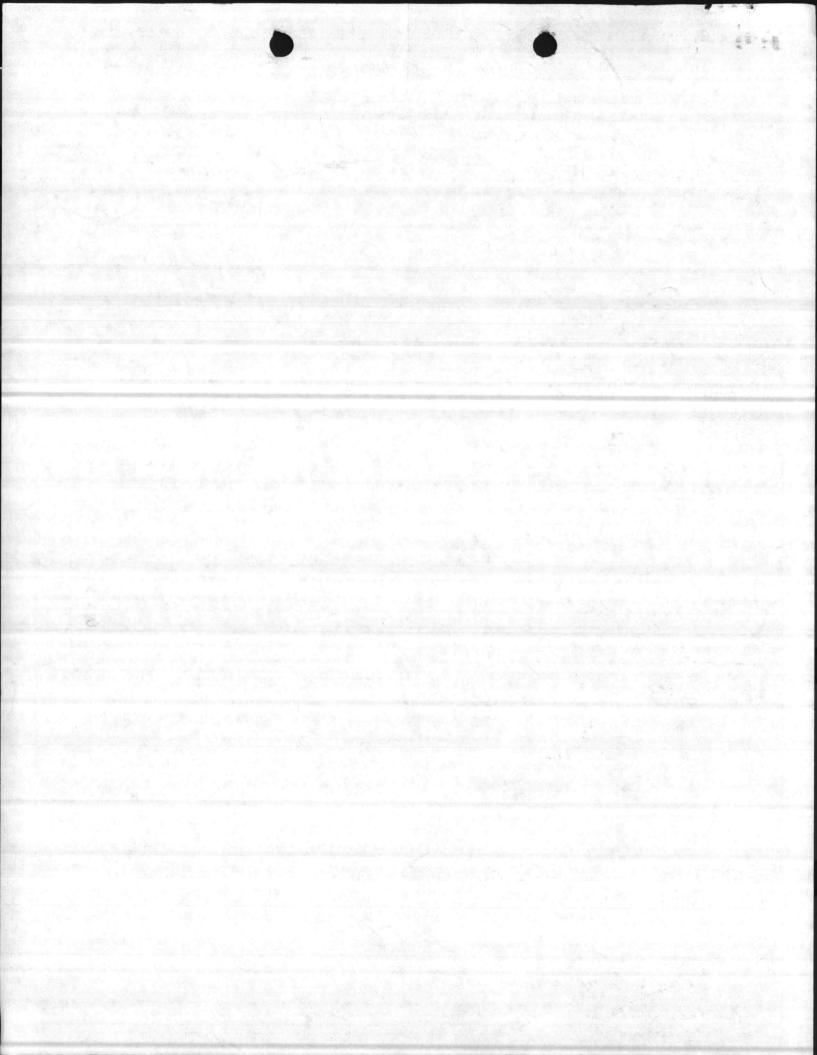
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UNIFORM HAZARDOUS WASTE MANIFEST	Generator's US EP.	01212151810	Manifest Document No.	2. Pag	e 1 Informati is not law.		he shaded areas ed by Federal
. Generator's Manie and Maning Address	DRMO-CAMP	LEJEUNE		A Sta	e Manifest Doc	ment N	lumber
	3ldg 906	NE NC 38	542	B. Stat	e Generator's If		HIN WALLEN
Generator's Phone ( 919 ) 451-5	613			1943			
Transporter 1 Company Name	6.		D Number	E3/6/25/18/2019/9	e Transporter's	2017 PAR 401	
NTransporter 2 Company Name	1/ /	V1010181718	D Number		sporters Phone		381-4999
		LITTI	11111	包括据录器	sporter's Poone		
Designated Facility Name and Site Address  Special Waste IN  1713 LeGion Ro	10	US EPA I	D Number		a Facility's 10		
ATHENS TN 37303	D	NID10131415	14/7/14/1	经经验的证据	(6/5) 743	9	222
US DOT Description (Including Proper Shipping N	计可控制 原物 计直接图像数据图		12. Cont	of the state of the state of the state of	13. Total	14. Unit	Bearing to the
			No.	Туре	Quantity	Wt/Vo	Waste No.
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			MAPE NO	1000			
Additional Descriptions for Materials Listed	A GAME OF THE PARTY OF THE PART				dling Codes for W		
5. Special Handling Instructions and Additional	91 / Smc				Philade Service		
GENERATOR'S CERTIFICATION: I hereby dec proper shipping name and are classified, packed, according to applicable international and nationa	lare that the contents marked, and labeled I government regulat	s of this consignmen, and are in all resper ions.	88 D-06: are fully and accurate in proper conditions	ately de	scribed above by	iy	
If I am a large quantity generator, I certify that I h			me and toxicity of w	ecto con	parated to the door	ee I haw	determined to be
If I am a large quantity generator, I certify that I he economically practicable and that I have selected future threat to human health and the environment	the practicable method	od of treatment, stora	ge, or disposal curre	ently ava	ilable to me which	minimiz	es the present and
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						DELI	VERY ORDER INVENTO	RY (NON PCB)							PI	CKUP R	EPORT	
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CLIN	12	FFIX	3 NSN	DODAAC	DATE	SERIAL	S ITEM NAME US DOT DESCRIPTION	6 STORAGE CONTAINER	STORAGE LOCATION	8 QUANTITY	UNIT	FETCE.	AMOUA+	12 EPA WASTE CODE	DUANTITY	and a second	14 PICKUP MANIFEST NUMBER LINE CODE	DATE
47204			9/50-00-011 1995E	M93182	1245	000 6	SEE ATTACKED SAMPLE 87-55 SEE ATTACKED SAMPLE 87-55	TRAK About Gad.	Tongua	12,500	G			Fool, Fe03	2500	GL	D0147	12/16/87
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COLLECTION SU	MMARY REPORT	SLA 200 88-100	DO 132 SO 135 SO 139  DELIVERY ORDER NO.  DO 1  Working days from the time that the contractor	MI .	
		Contracting Officer Within ten (10)	working days from the time that the contractor enclosed contract and/or delivery order.	leaves the	
A DESCRIPTION OF CHEMICAL	1. Actual location of chem	nicals BASE TANKS ST- ST-	61 2. RIC Sy - 2014		
COLLECTION SITE	CAMP Lejeune	Ne sta	3. Accountable DRMO Lejeune		p E 3
	ISCELLANEOUS CHEMICA		DD-250 or DRMS-1697, Pickup Report, as ap	plicable	
	differences between the qua itional documents as necessa	<b>疆出土东西的影片的自然的</b> 特别的自然的特别的 医克拉耳氏 医克拉克氏 医克拉氏性皮炎	uantity of chemicals shown in the contract and	or delivery	
2. Please fill in the colum	ns describing the number of	containers requiring overpacking, rep	acking, draining,etc., if any.		
C. EVALUATION OF	1. Date of contractor arriv	3. Please check either S (s contractor's performal encountered, if any.	atisfactory) or U (unsatisfactory) for each phas ace and specify any problems and/or positive act	tions S	u
CONTRACTOR'S	2. Date of contractor department		ctor/COR briefing/notification	X	11/1/1
CONTRACTORS		c. Final clean—up and		12	-
PERFORMANCE	12-08-87	d. Safety of personnel		X	
	And the second of the second o	e. Number of trucks us	ed	3	
D. DOCUMENTATION R	ECEIVED Charles to			YES	NO
2. DOCOMENTATION A	Check each do	ocument received by PDO for filing	a. Manifest b. Form DD 250 (or DRMS Form 16	(97) X	
		NTS YOU MAY HAVE REGARDIN	G OVERALL CONTRACTOR PERFORMANC ary Report, etc.)	E,	
. Name of PDO submittin	greport leign	WE NC 3. COR Sign	june a b. Kunter		
Printed or typed name of			report submitted	H IS CONTRACT	

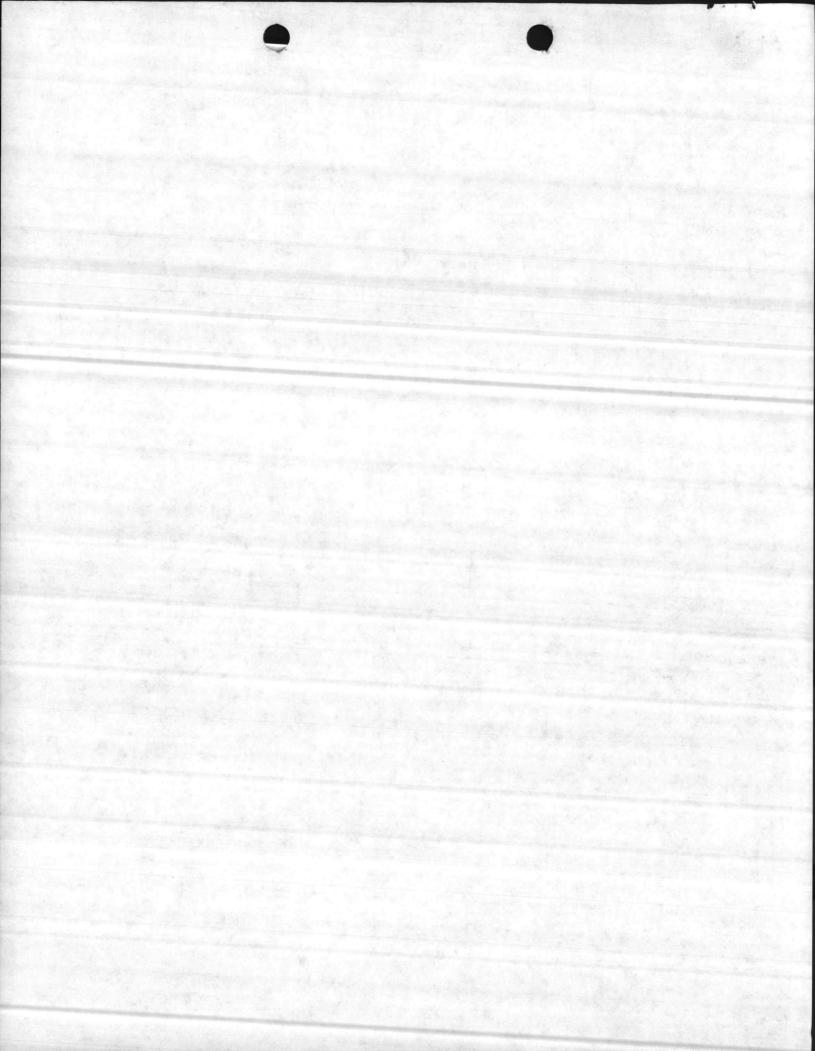


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productive and the second	Generator's US EPA ID No.	-	anifest a	Charles Transport	-	he shaded areas
WASTE MANIFEST N	C61 7100225B	4 2 5 1	ment No.	f So lan	ot required t	y Federal law
Generator's Name DRMO GAL	906 ATTN. 680	MOE E	66000	A. State Manifest I.	Document N	umber
MARINE COR	SASE SNE) NC 28542	O T		IN 053	935	* 4
Generator's Phone CAMA LESSE	sne) NC 2854d	1194		B. Steer Generale	-10	
Generator's Phone (919) 451-5	6. US EPA ID Number		10 TO	C. State Transcort	era ID	1
OSCO INC	TINIDID189	15150	10119	D. Yminaporiera Pi	学科学 一年 为五年	1381-4949
Transporter 2 Company Name	8. US EPA ID Number		22502	E. Staja Transport	1000	
Designated Facility Name and Site Address	JAN SPAUS EPAJO Number	- copera - C		6. Transporters Pl G. Statu Facility's	SECTION AND SECTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Designated Facility Name and Site Address SYSTECH CORPORATION LIMEDALE Rd	/ LONGOING CEMON	25	1	C. Wint	43070	<b>2016年</b>
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GENERATOR'S CERTIFICATION: I hereby deci classified, packed, marked, and labeled, and ar government regulations	are that the contents of this consignment a e in all respects in proper condition for th	ansport by h	ighway acco	cribed above by prop rding to applicable in	er shipping i iternational	and national
Unless I am a small quantity generator who						
Section 3002(b) of RCRA, I also certify that I have selected the	re a program in place to reduce the volum method of treetment, storage, or disposal o	e and toxicit currently avai	of waste ge table to me w	nerated to the degree high minimizes the pr	esent and tu	ture threat to
human health and the environment.	Signature		The same of the sa	Man and Man and Aller	well a lary	The state of the s
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7. Transporter 1 Acknowledgement of Receipt of M	atorielo	ic this was	Halle William		100	Date
Printed Typed Name	Signature	///	400		Mons	h Day Year
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8. Transporter 2 Acknowledgement of Receipt of N	the second secon			2 mar 1 m 2 mar 1	10 T	Date
P. Ronted/Typed Name	Signature		· Alog		Mon	Day Year
		The second second			141	T TE LEVE
19. Discrepancy Indication Space	Control of the Contro		L. Dinks	Kan Miles and P	FRIDE.	Comment.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted from 18.

Signature

Printed/Typed Name



DO NOT WRITE IN THIS SPACE Division of Land Pollution Control - Manifest Indiana State Board of Health P.O. Box 7035 Indianapolis, IN 46207-7035 Please print or type (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 9 1, Generator's US EPA ID No. UNIFORM HAZARDOUS Manifest 2. Page 1 of is not required by Federal law WASTE MANIFEST 101611170101212157810D1011131 MARINE COLDS BASE LAMP LEJEUNE, NC 28542 4. Generator's Phone (919 1451-5613 5 Transporter 1 Company Name

OSCO INC 6. US EPA ID Number

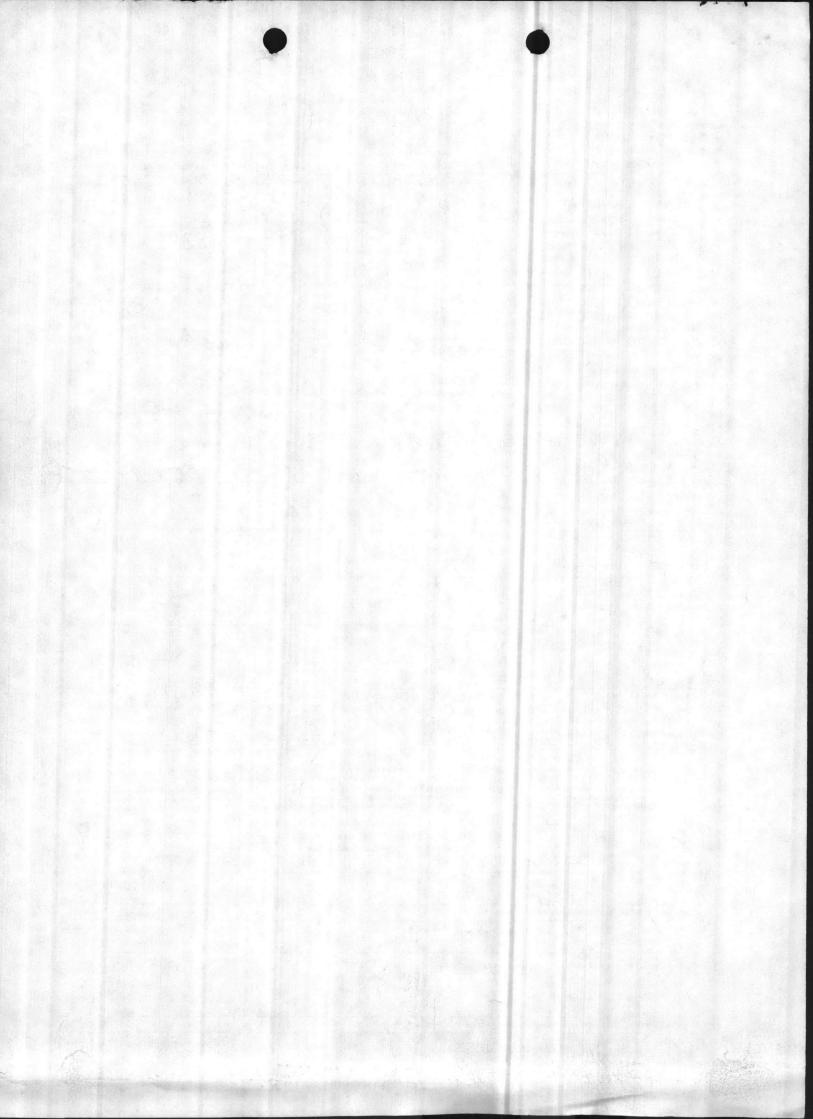
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8. US EPA ID Number 65/381-499 7. Transporter 2 Company Nam F. Transporter's Phone 9. Designated Facility Name and Site Address
SYSTECH CORPORATION /LONGSTAR C. C. G. State Facility's ID LIMEDALE Rd H. Facility's Phone GREEN CASTIE IN INDIOIO6411912112 317-453 -2606 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number). Unit Waste No. Total No. Type Quantity Wt/Vol · RQI WASTE OIL NOS, COM DUSTIBLE Liguid, NA. 1270 (DOOI, FOOI, FOOR, D 000 J. Additional Descriptions for Materials Listed Abo A) Fco1, Fco2, Fco3, Pco5 K. Handling Codes for Wastes Listed Above TRUCK PP 1,0,# 0585 15. Special Handling Instructions and Additional Information SPECIAL WASTE INC is This FACILITY'S CONTRACTOR FOR HAZANDOUS WASTE PLENSE ROUTE ALL BILLING AND COVIESPANDINE to: P.O. BOX B, SAUKUILLE, WI 5300 DI 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. Printed/Typed Name Month Day Year / 1 2 0 8 8 7 2 horsted 17. Transporter 1 Acknowledgement of Receipt of Materials 112018 ecrum 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

PA Form 8700-22A (1997)

Printed/Typed Name

Signature



Division of Land Pollution Control - Manifest Indiana State Board of Health DO NOT WRITE IN THIS SPACE

P.O. Box 7035 Indianapolis, IN 46207-7035 205039 Please print or type: (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 8494 Expires 7 31 86 1. Generator's US EPA ID No. UNIFORM HAZARDOUS Manifest Information in the shaded areas 2 Page 1 of WASTE MANIFEST 1961/10022518100101136 DRMO Blde 906 ATIN: GEOR MARINE CORP LOTSE CAMP LESEUNE, NC 28542 IN 053934 4. Generator's Phone (919 ) 451-56 3 5. Transporter 1 Company Name G. State Facility's ID Designated Facility Name and Sile Address
5 15TEC H CORFOVATION /LONESTAR! GREENCASTE, II FIND 100Kg411921 6 317-653-2606 Total Unit Waste No. Quantity Wt/Vol No. Type · RAI WASTE O. L. NOS, COMBUSTIBLE Liquid, NA 1270 (DOOLFOO), FOOZ, FOO3 FOOS) (10) J. Additional Descriptions for Materials Listed Above
A) FOOI, FOOO, FOO3, FOO5 K. Handling Codes for Wastes Listed Above TRUCK QQ P.O. # 0585 DLAGOO-BB-D0033/Dig. 001

15. Special Handling Instructions and Additional Information SPECIAL WASTE INC., 73 This facilities
CONTRACTOR FOR HAZAROUS WASTE, PLEASE ROUTE ALL 6, 11-12 AND Correspondence TO: P.O. Box B, SAUXUILLE WI 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national ses I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have s which minimizes the present and future threat to human health and the environment. MATER ledgement of Receipt of Materials 18 Transporter 2 Acknow Printed/Typed Name Signature Day 19. Discrepancy Indication Space

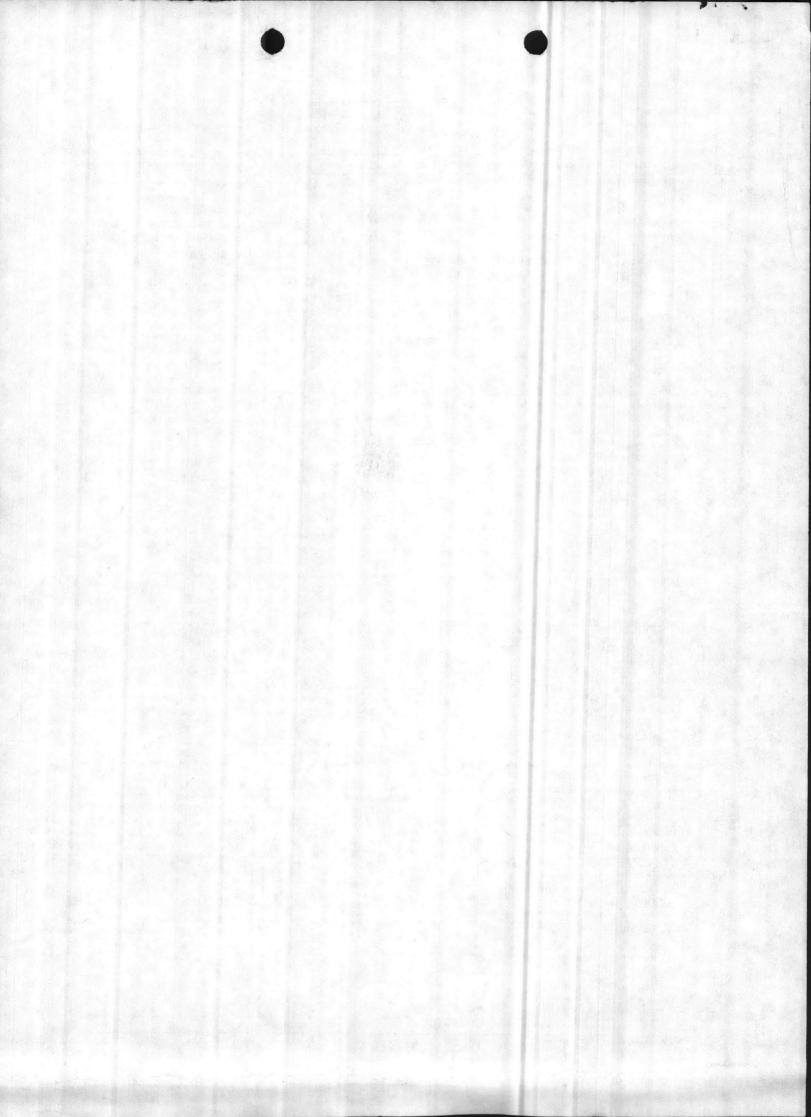
RETURNED TO THE GENERATOR BY THE T.S.D.

Signature

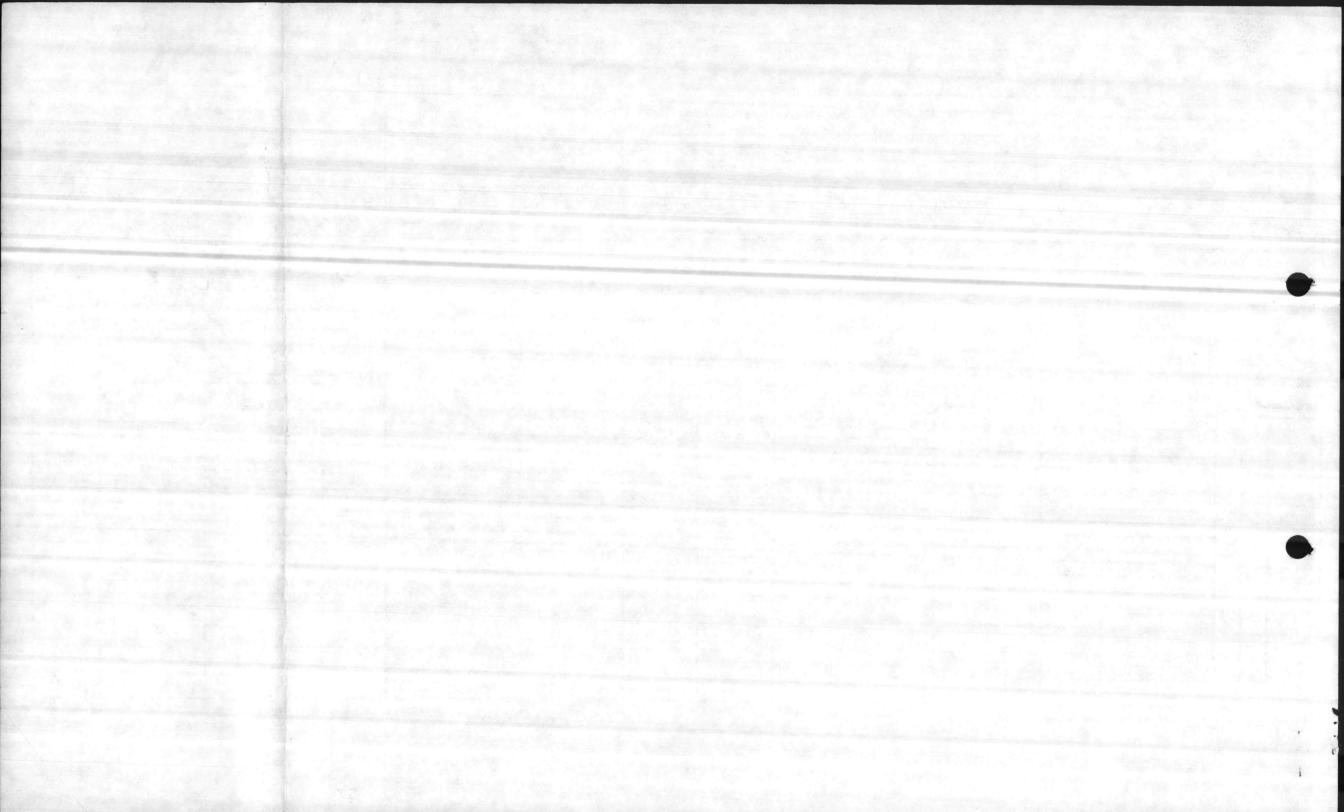
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

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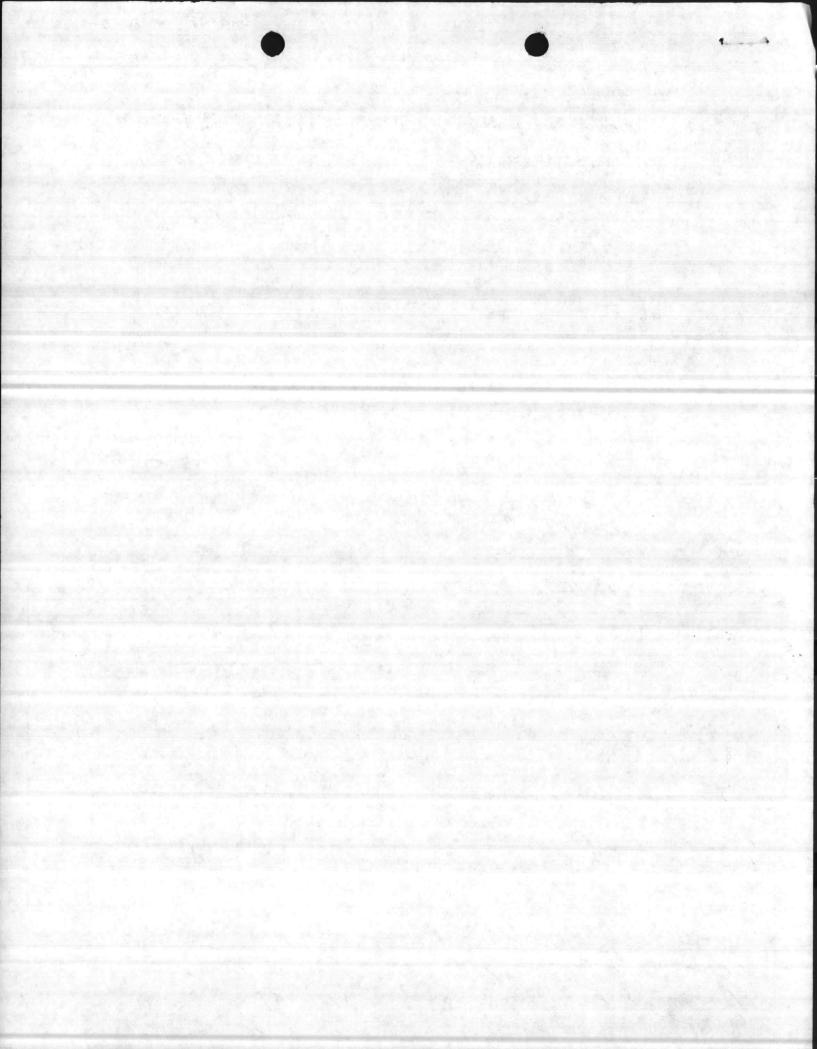


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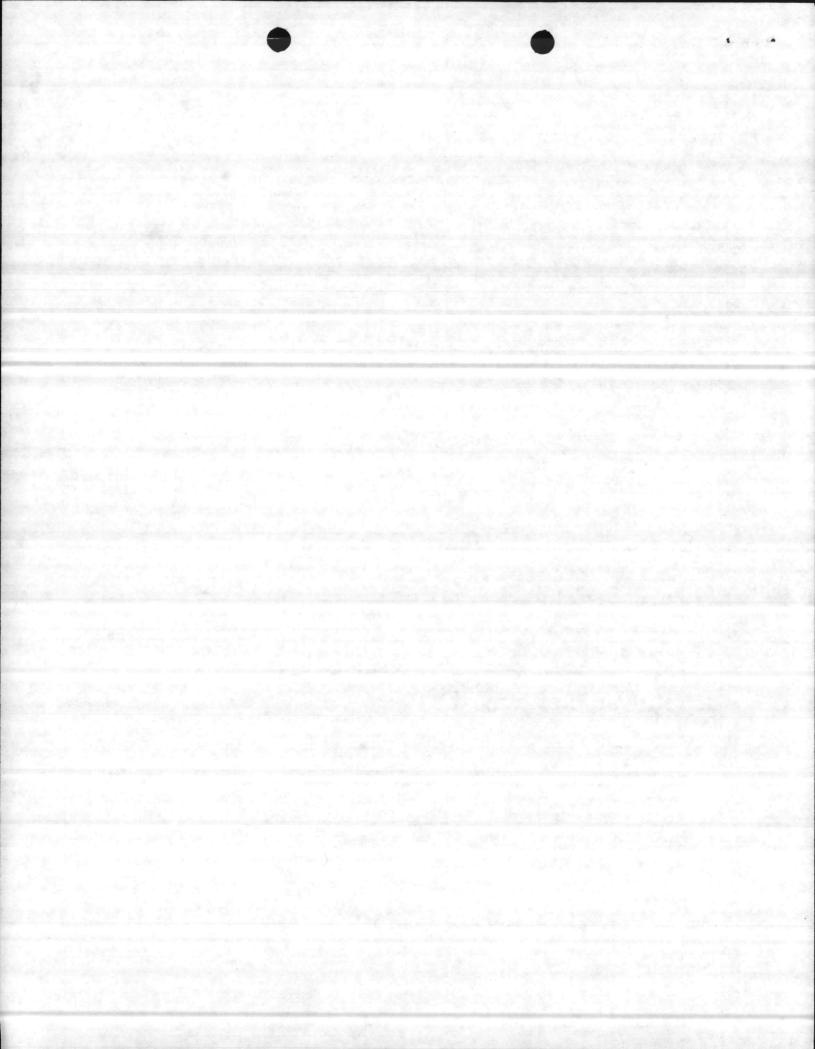
COLLECTION SU	JMMARY REPORTEDLA	RACT NO. 2 DOO:	BELIVERY ORDER NO.		
		ting Officer within ten (10) work	king days from the time that the contractor leav	es the	
A DESCRIPTION OF	1. Actual location of chemicals  Marine, Cares Base	TAUKS 8	389 2. RIC SY-2014		
COLLECTION SITE	Marine Corps Base CAMP Lej EUNE, N	C	3. Accountable DRMO		
	IISCELLANEOUS CHEMICALS COL delivery order. If not provided, state	LECTED. (Attach copy of DD-	250 or DRMS—1697, Pickup Report, as applical copy of annotated inventory.	ole	
	differences between the quanity of differences between the quanity of ditional documents as necessary)	chemicals collected and the quant	ity of chemicals shown in the contract and/or d	elivery	
2. Please fill in the colum	nns describing the number of containe	rs requiring overpacking, repacki	ng, draining,etc., if any.		
CLIN	ITEMS	QUANTITY	REMARKS		
C. EVALUATION	1. Date of contractor arrival		actory) or U (unsatisfactory) for each phase of nd specify any problems and/or positive actions	S	U
OF		a. Adequacy of Contractor/		X	
CONTRACTOR'S	2. Date of contractor departure	b. Adequacy of repackaging c. Final clean—up and deco		X	-
PERFORMANCE	12-7-87	d. Safety of personnel	Training to the state of the st	X	
		e. Number of trucks used		5	
D. DOCUMENTATION F	RECEIVED Check costs document	respired by PDO for filling	Co. Manifest	YES	NO
b. Gocomentation i	Check each document	received by PDO for filing	a. Manifest b. Form DD 250 (or DRMS Form 1697)	X	
	DE ANY SPECIFIC COMMENTS YO OR COMMENTS (on improving this		VERALL CONTRACTOR PERFORMANCE,	12	
1. Name of PDO submitting  Rmo CA  2. Printed or typed name of	amp LEJEUNE, N.	3. COR Signature 4. Date this repo	inence fo. Nurtes		
HUNTER,			- 7-87		



Division of Land Pollution Control - Manifest DO NOT WRITE IN THIS SPACE

Ilana State Board of Health D. Box 7035 Ilanapolis, IN 46207-7035		LPMSegur Gross		2	650-00	39 g-
lease print or type. (Form designed f		F	orm Appre	oved OMB No.		<b>拉拉斯拉斯斯斯拉斯</b>
WASTE MANIFEST	1. Generator's US EPA ID No.  NICIOI 1700225	Docu	anifest ument No.	2. Page 1 of	Information in is not required	
MARI CAMP	To Bidg 906 THE CORPS BASE AT LESEUNE, NC AT	Repaired his to the		IN 053		lumber
Transporter 1 Company Name  55C5 TNC  Transporter 2 Company Name	6. US EPA ID Num	95 58	0119	C. State Trans D. Transporte E. State Trans	r's Phone	5/381-9
Designated Facility Name and Site Address 5/376CH CORPOVATION LIMEDALE RE GREEN CASTIE, ENDIT				F. Transporte G. State Facil H. Facility's P	's Phone ty's ID	60C
1. US DOT Description (Including Proper Ship	ping Name, Hazard Class, and ID Number)	12. Cont	- ANT ASSESSMENT	13. Total Quantity	14. Unit Wt/Vol	I. Waste No
Ligo d, NA 1270,CA	001, FOOD, FOO3, FOOS, DE	101016	ナナ	0600	06	DOO
	at the same of the	111		111		
	re-constant of the second of t		1		1 .	
Additional Descriptions for Materials Listed A						199
TRUCK MM P.O.  5. Special Handling Instructions and Additiona TRUCK MM P.O.  6. Special Handling Instructions and Additiona TRUCK MM P.O.  6. (Ling To: P.O. Box	TOS85 Information SPECIAL WAS PIERSE ROUTE A	11 CORK	, is Respo	ndence	1/4/5 C	CONTRAC
and labeled, and are in all respects in proper con if I am a large quantity generator, I certify that I have	are that the contents of this consignment are fully an dition for transport by highway according to applica e a program in place to reduce the volume and toxicity it, storage, or disposal currently available to me which the effort to minimize my waste generation and select	ble international and of waste generated the minimizes the pres	to the degree I sent and future	ernment regulations. have determined to b threat to human hea	e economically pra	cticable and that
Transporter 1 Acknowledgement of Receipt						Date
Printed/Typed Name 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Mant Signature of Materials	rett !	By	an	Month	Day   8   Date

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



Division of Land Pollution Control - Manifest Indiana State Board of Health

DO NOT WRITE IN THIS SPACE

P.O. Box 7035 2650-0039 9-30-88 Form Approved OMB No. 2000 8494 Expires 7-91-86 Indianapolis, IN 46207-7035 Please print or type. (Form designed for use on elite (12-pitch) typewriter) Manifest 2. Page 1 of UNIFORM HAZARDOUS Information in the shaded areas Document No is not required by Federal law WASTE MANIFEST VICKI 1700212158 0 D101130 DRMO Blog 906 MARINE COAD BASE CAMP LESEUNE, NC 28542 A State Manifest Document Number 3 Generator's Name IN 053944 4. Generator's Phone (919) 451-5613 ATTN: GOO'65 E660VS C. State Transporter's IDG/5/381-4917 5. Transporter 1 Company Name

5. Transporter 2 Company Name

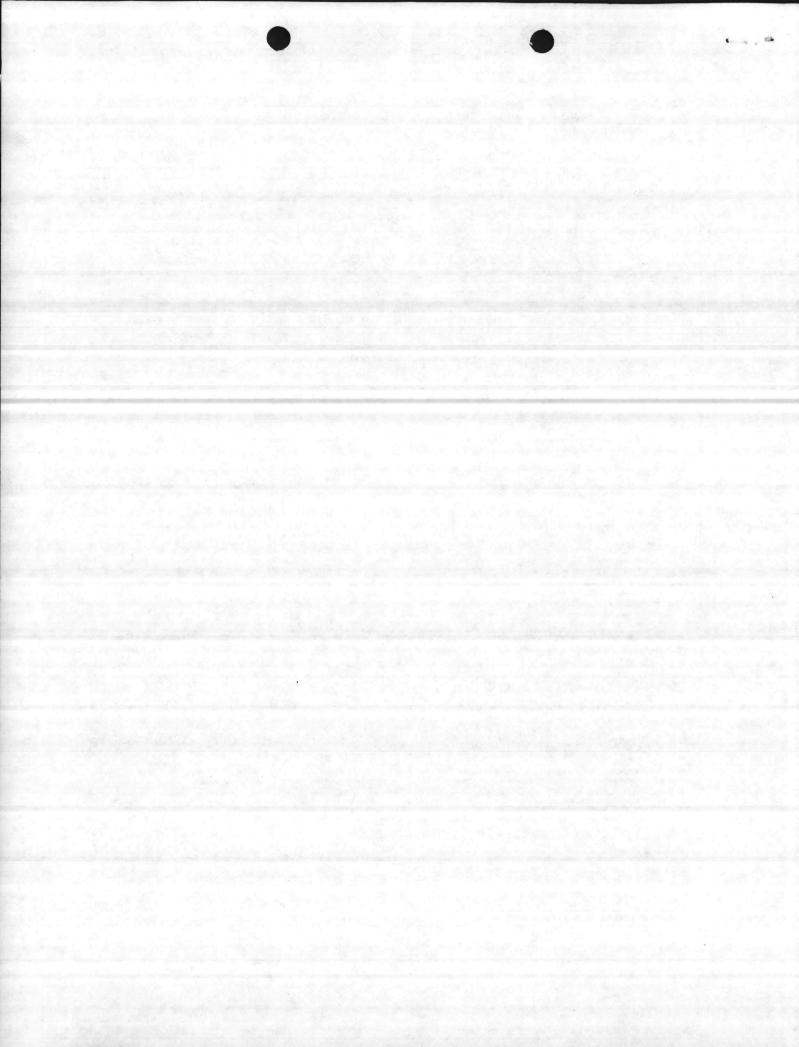
7. Transporter 2 Company Name D. Transporter's Phone E. State Transporter's ID F Transporter's Phone 9. Designated Facility Name and Site Address

SySTECH CORPORATION / LONESTAR G. State Facility's ID Limedale Rd H. Facility's Phone 317653-2606 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Unit Waste No. Type Quantity Wt/Vol No. · RQI WASTE OIL NOS, Combustible Liquid, NA 1270 ( FOOD, FOO3, FOO5, FOOL, DOOI) Dool 001 0 d. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above A) FOUL, FOOZ, FOOS, FOOS TRUCK KK P.O. Box 0585 15. Special Handling Instructions and Additional Information SWI is The Contractor FOR this FAC. 1/ty's HAZAVOOUS WASTER PLEASE ROUTE All Correspondences and to: P.O. BOX B SAUKUILE, WI 53080 DLA200-98-00083 D.O. 1 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. Duright Challe Day Month 017 TUNTER 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed, Name ANSPOR 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature TER Day Year

19. Discrepancy Indication Space

ACIL

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



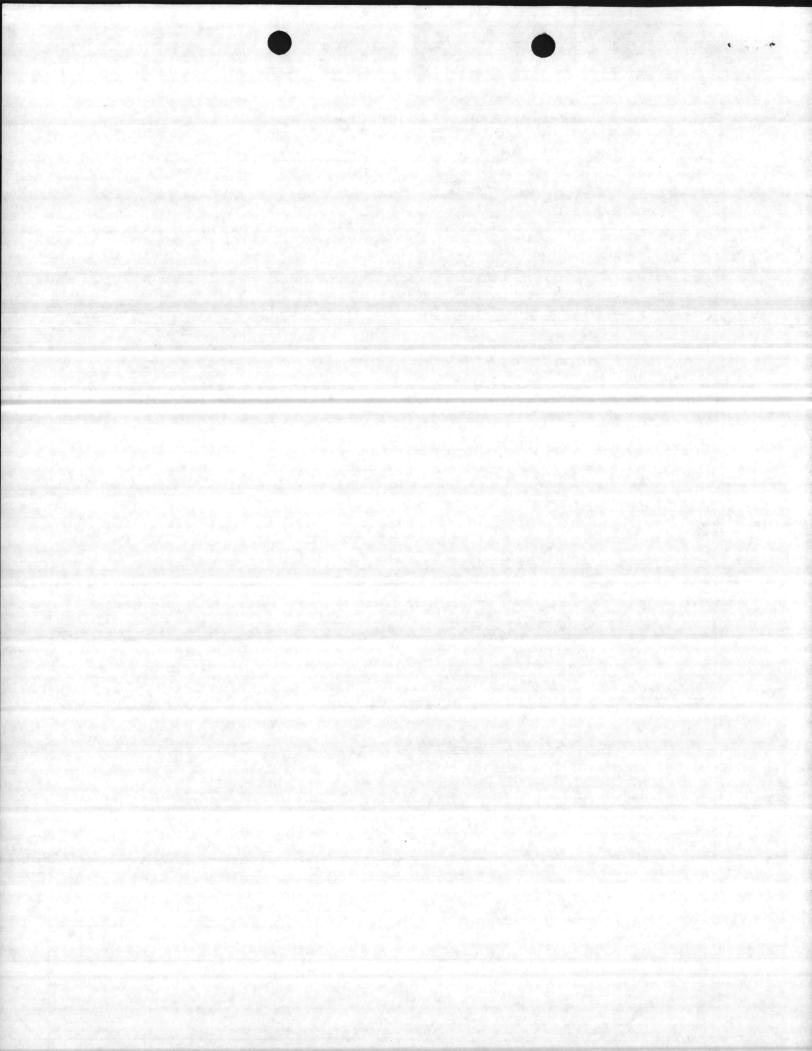
IN 053943

dianapolis, IN 46207-7035 Please print or type. * (Form designed for	or use on elite (12-pitch) typewriter)	F	orm Appro	ved OMB No	ACCUSED FOR THE PARTY.	94-Expir	39 9-
UNIFORM HAZARDOUS	1. Generator's US EPA ID No.		anifest	2. Page 1 of	Informa	tion in the	e shaded are
WASTE MANIFEST	W. C. 6. 1. 20. 0225		ment No.	1	is not re	quired by	Federal la
3. Generator's Name	NIGHTO DODES	9900	IPII	A. State Man		ment Nu	mber
MA	RINE CORPS BASE			IN 05		43	
4. Generator's Phone ( 919 ) 451-	5/013 ATTN: GE	OVGE E	66000	B. State Gen	arator s IL		
5. Transporter 1 Company Name	6. US EPA ID Numb	et		C. State Tran	<b>用的多数为65%</b>		30,04
7. Transporter 2 Company Name	8. US EPA ID Numb		9111	D. Transporte			381-4
in the state of th		111		F. Transporte G. State Faci		(4.18) P.	
9. Designated Facility Name and Site Address 5 VSTECH CORPORATI	ou Konestar Comon	<del>Per</del>		G. State Faci	nty's ID		
Limebale Rd	TIM NOIN	11119	121112	H. Facility's F	hone 653	-2	1000
GREENCASTIE, INDIAN,		9 4 / 1 12. Con	A CONTRACTOR OF PERSONS	13.	Color Police Building	14.	1.
11. US DOT Description (Including Proper Ship)	ping Name, nazaro Ciass, and ID Number)	No.	Туре	Total Quantity	V 320	Unit /t/Vol	Waste No
ROLLIASTE OIL IVE	05, COMBUSTIBLE			1		p Ko Jak	No. of the last
- ROI WASTE OIL IN Liquid, NA 1270 (FOO	1, F00 3, F00 3, F00 5,000	)	7			6	1
		001	///	0550	00	J	000
				1	39 3		
		11		111	1	7.70	
C							
		11		111			
d.						alter of	
		111	1	1 1 1	1		2000 V
J. Additional Descriptions for Materials Listed A			K. Handlin	ng Codes for Wa	stes Liste	d Above	
A.) Fool, Fooz, Fooz, Foo	o5						
TRUCK LL P.O.	0585		R (E. L. S.)		nt 70	11.61	- 10-10
15. Special Handling Instructions and Additiona	al Information SPECAL WA	370 1	5 thi	5 FACI	17/8	5 (2)	THORK
15. Special Handling Instructions and Additional Corner MAZAVOOCS WAST	E. PIGASE ROOTE A	1 Cori	2500	ndence	* An	1	
billing to: P.O. Box	B, SAUKVIlle, WI	530	800	LA 200-1	38-1	00033	3 0.01
1	declare that the contents of this consignment are fully	and accurately des	scribed above t	by proper shipping i	name and a	re classifie	d, packed, m
and labeled, and are in all respects in proper	condition for transport by highway according to app.		t-dt-thedeen	as I have determine	d to be ecor	nomically p	racticable an
have selected the practicable method of treatn small quantity generator, I have made a good	have a program in place to reduce the volume and toxi ment, storage, or disposal currently available to me w faith effort to minimize my waste generation and sel	hich minimizes the ect the best waste	present and ful management r	ture threat to huma method that is avail	able to me	and that I c	an afford.
			,	/ .		10.52	175
Printed/Typed Name	Signature	a &	KL	unter		Month / 2	Day d
17. Transporter 1 Acknowledgement of Receipt	of Materials	- /-				The second	Date
Printed/Typed Name	Signature,	410	11.			Month 1 10	Day
	of Materials	w/ho	ww	ner		19	Date
18. Transporter 2 Acknowledgement of Receipt			101 CO 101 CO 101 CO		-	-	-
18. Transporter 2 Acknowledgement of Receipt Printed/Typed Name	Signature					Month	Day

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

Printed/Typed Name

Signature

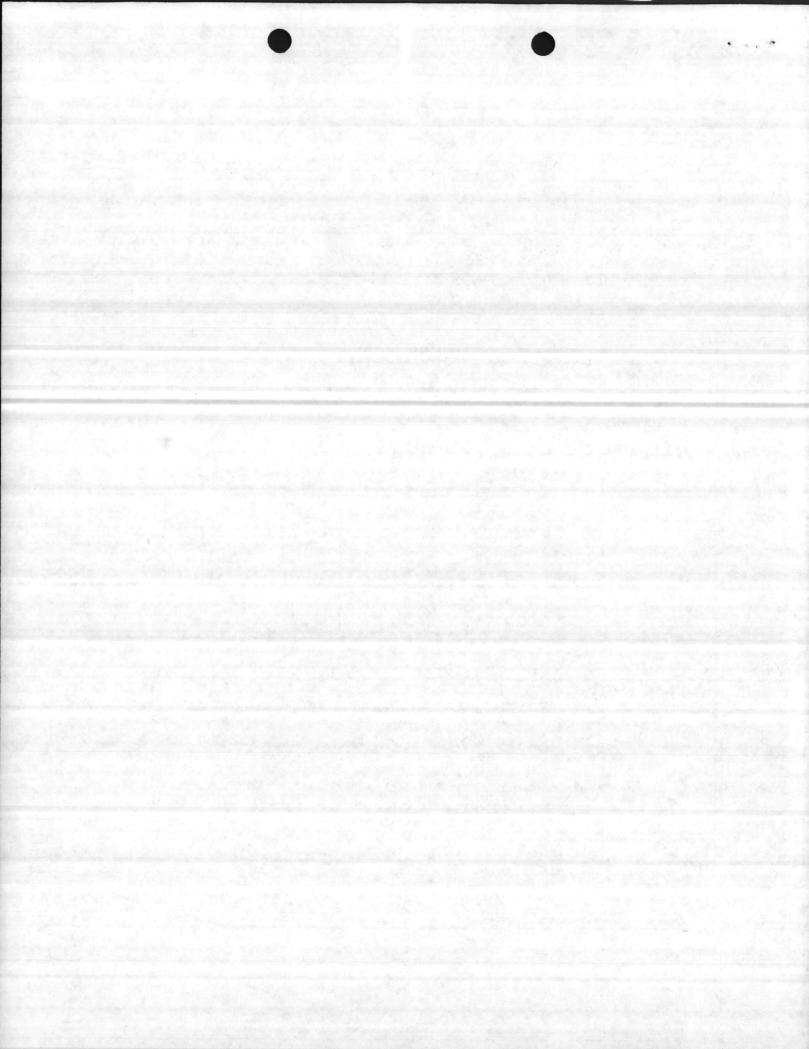


Division of Land Pollution Control - Manifest Indiana State Board of Health P.O. Box 7035

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UNIFORM HAZARDOUS  1. Generator's US  WASTE MANIFEST  NGG17	80 NO	anifest ument No.	Page 1 of Information in the shaded areas is not required by Federal law				
3. Generator's Name DRMO BHS	900 BASE 2854	3	i i	A. State Manifest IN 0539  B. State Generato	940	umber	
4. Generator's Phone (9/9) 45/- 56/3  5. Transporter 1 Company Name  0 5 0 INC.  7. Transporter 2 Company Name	6. US EPA ID Number	7151518	0119	C. State Transport D. Transporter's P E. State Transport F. Transporter's P	ter's ID	5/38/-4	
9. Designated Facility Name and Site Address SYSTECH CORPORATION / Lones Lime Dale Rd				G. State Facility's  H. Facility's Phone	9	7/ 4/	
GREENCASTIE, INDIANA	ITWIDIOIO	TO A THROUGH MANAGEMENT		317-6	J 3-0	2006	
11. US DOT Description (Including Proper Shipping Name, Hazard C	lass, and ID Number)	No.	Type.	Total Quantity	Unit Wt/Vol	Waste No.	
1. RQ1 WASTE O: 1. N.O.S., COM Liguid, NA 1270 (DOOI, FOOI, FOOZ, FOO		0011	TT	015151010	6	D001	
b.							
C.							
				1111			
d.							
J. Additional Descriptions for Materials Listed Above			K Handli	ng Codes for Wastes	Listed Abov		
A) FOOI, FOOZ, FOOS TRUCK CO P.O. # 0585		ii baana					
15. Special Handling Instructions and Additional Information 5.00  FOR HAZAROBUS WASTE, PLEASE  FO: P.O. BOX B, SAUKUITA	Route All	Corre	SO D	this their lence hi LA 200-81	11 45 med 8.	CONTRAC 7/1 Mg	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the and labeled, and are in all respects in proper condition for transport by hill fill am a large quantity generator, I certify that I have a program in place to rehave selected the practicable method of treatment, storage, or disposal cusmall quantity generator, I have made a good faith effort to minimize my to the content of the conte	educe the volume and toxicity	of waste generate	ed to the degree	I have determined to be e	economically p	racticable and that I	
Printed/Typed Name Howten, L.E.	Signature	me k	. 4	unter	Mont	2078	
17. Transporter 1 Acknowledgement of Receipt of Materials  Primed Typed Name  A City 7  18. Transporter 2 Acknowledgement of Receipt of Materials	Signature	Sel	low	Rung	Mont / L	Date Day Year	
	Signature	Mar No.		0	Mont	h Day Yea	
Printed/Typed Name							

Signature

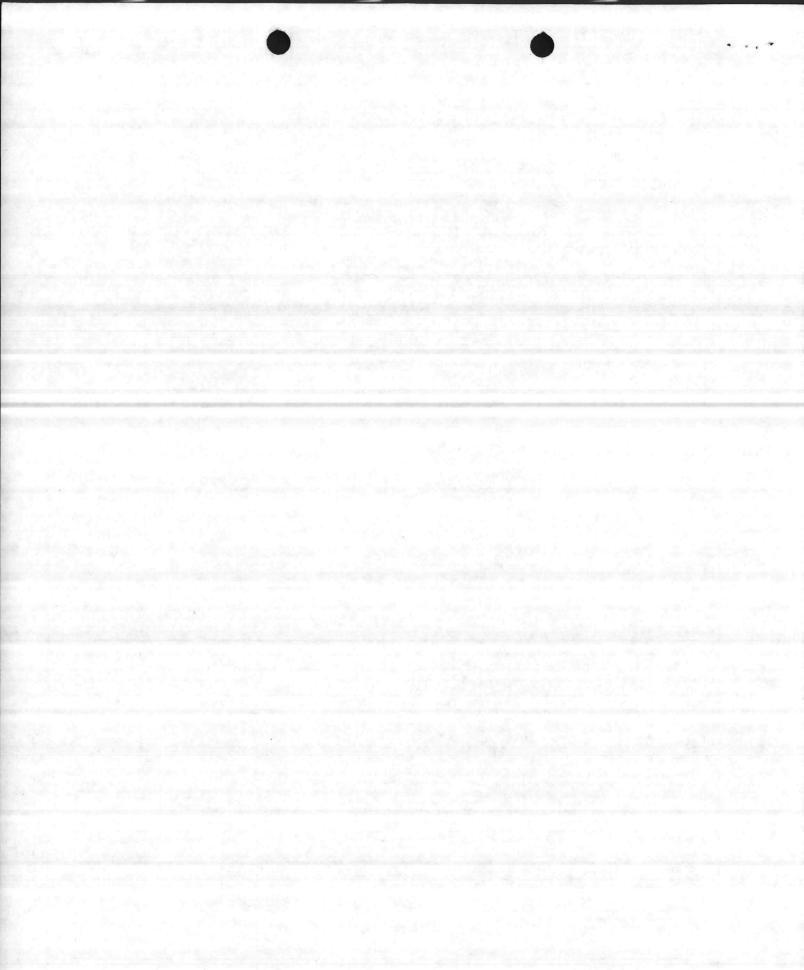


Division of Land Pollution Control - Manifest Indiana State Board of Health

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lease print or type. (Form designed	for use on elite (12-pitch) typewriter)		orm Appro	ved OMB No: 2	2000-0404_Exp	ires 7 81 86		
WASTE MANIFEST	1. Generator's US EPA ID No.  N   C   G   7   0   0   2   2   5	Doc	lanifest ument No.			ormation in the shaded areas not required by Federal law		
TIN GEENS = GOODS MA	RINE COR es BASE		111011	A. State Manife	umber			
	1-5013 6. US EPA ID Numb			B. State Gener	g (1997) 1.436 C	-/3		
The supporter 2 Company Name	T N D S	প্রচাহা৪	101119	D. Transporter E. State Trans F. Transporter	r's Phone	191-47		
Designated Facility Name and Site Address SYSTECH CORPORATION	LANESTAR COMENT	ber		G. State Facili				
Limedale Rd GREEN CASTIE, IND	ANA INOIOIO			Control of the contro	653-2	606		
11. US DOT Description (Including Proper Shi		No.	Type	Total Quantity	14. Unit Wt/Vol	Waste No.		
Liquid, NA1270 (D		alau	77.7	ACICA	06	Doo		
~.;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	101, 4001, 4002, 4003, 4005)	001/	/ / /	05160	0			
				111	1 42 3	No tracked		
				111				
Additional Descriptions for Materials Listed  A) Fool,	o <b>s</b>		K. Handlin	ng Codes for Was	I I tes Listed Above			
TRUCK UN POLA 15. Special Handling Instructions and Addition TON HACTOR FOR MAZ AU DILLING TO: P.	al Information Special WAS  AVAOUS WASTE, Pla  O BOX B SAUKUILLE	curately described	5309	er shipping name and	200-88	000336		
and labeled, and are in all respects in proper condi- if I am a large quantity generator, I certify that I have a have selected the practicable method of treatment, small quantity generator, I have made a good faith (	uon for transport of highway according to application program in place to reduce the volume and toxicity of wat storage, or disposal currently available to me which mis effort to minimize my waste generation and select the	raste generated to t	he degree I have	e determined to be ec	conomically practicated	able and that I		
Printed/Typed Name  HUNTER L.E.  7. Transporter 1 Acknowledgement of Receip	Signature Square t of Materials	-6	Muit	tu	Month 1 2	Day Yes 0 17 8 P		
Printed/Typed Name	Signature Signature	e S	male	8	Month 1 12	Day Pea		
8. Transporter 2 Acknowledgement of Receip						Month Day Yea		
8. Transporter 2 Acknowledgement of Receip Printed/Typed Name	Signature				Month	Day Yes		

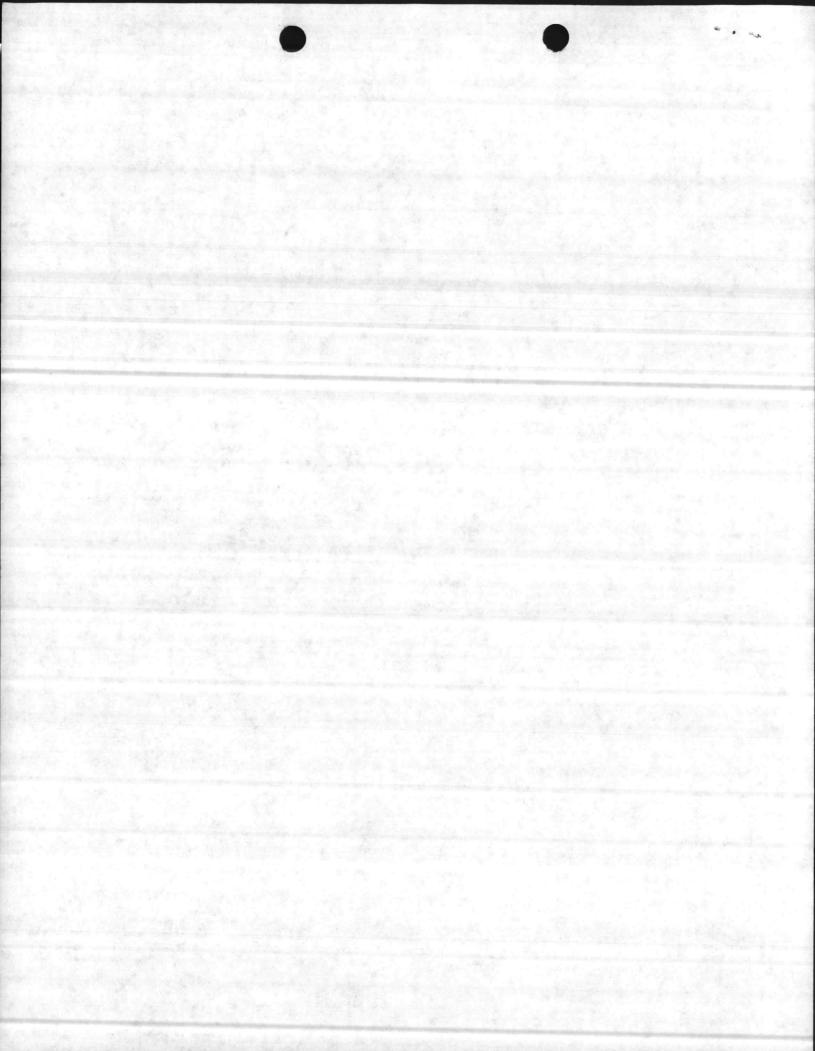


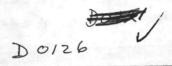
DELIVERY ORDER INVENTORY (NON PCB)										PICKUP REPORT								
GENERATOR MARINE CORPS BASE							PA NUMBER NC 6/70022580   AMARDED CONTRACT NUMBER   DLA 200-88-D-003				0033	SHADED FORTIODS OF ITS OCCUPANTED BY CONTRACTING OF RICE						
CAMO LEJEUNE NC 28542					LEIEUNE							86 P = 0033 DELAKEY CONTRACTOR						
C-FORGE EGGERS					FICKUP LOCATION THOUGHT 5891 - TANK 889 - TANK STT-61 - TANK STT-62  [AUTOVON PHONE NUMBER 484 - 5613 / 5652						TADO 1558  TSDF NAME  SYSTECH  EPA NUMBER  PARIMETER NAME  EPA NUMBER  LINDO 0419							
GENERATOR REQUEST NUMBER					SWA						AUTORIZED TRANSPORTER BIGNATURE  AUTORIZED CONTRACTING OFFICER PERESENTATIVE (COR)							
SEA	IT TO	CONT	RACTING '87			enciem og formule deno	85 4 55 1 5 5 10 Section 9-15 11-7						Faverere & Heuter					
CLIN	2 5	UFFIX	S NSN	4	0710		ITEM NAME US DOT DESCRIPTION	S STORAGE CONTAINER	STORAGE	QUANTITY	UNIT	PRICE	SAKES SPEED	WASTE CODE	GUANTITY	UNIT	MANIPEST NUMBER	DATE FICKED UP DOMMYY
47204	-	Tan	9/50-00-01/098E	DODAAC	DATE	SERIAL DOOF	SES ATTACHED Sample 27-55	TANK Denue Ged.	TERROR STEEL	12,500	G	2.95	the word or ex-	GOOD FORD	tomo	GI	100/3/	12-7-87
477na	10	OAB	17/50-00-011 WASTE	402192		CONTRACTOR CONTRACTOR AND ADDRESS.	SEE ATTACHED	TANK Above Ged	TOMANS TRANSA 5TT-62	12,500	1000	2.95		Fan food Fan Fas Fan Fas Fan Fas Food Fas	\$500 2500	61	D0130 D0130	12-7-87
4720A	90	o ac	9150-00-011 WASHE	M 93182	T	000 3	SEE ATTACKED	About God	S-889	17,500		2.95		FOOL FOS	3000	6	Do138 Do137	12-7-87
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DESCRIPTION SAIT CLEGO Take .

COLLECTION SU		A 200-88-D 0033	3 OOO /		
		cting Officer within ten (10) work	ing days from the time that the contractor leave	es the	
A. DESCRIPTION OF CHEMICAL COLLECTION SITE	1. Actual location of chemicals MARINE Corps & Come Lejeure,	PASE TANK - S-8 N.C. S-8	2. RIC 34 - 20.9 3. Accountable DRMO LEI EUN E		
B. DESCRIPTION OF N		LECTED. (Attach copy of DD-	250 or DRMS-1697, Pickup Report, as applical	ole	
1. Please indicate any			ity of chemicals shown in the contract and/or d	elivery	
2. Please fill in the colum	nns describing the number of containe	ers requiring overpacking, repackin	ng, draining,etc., if any.		
CLIN	ITEMS	QUANTITY	REMARKS		
C. EVALUATION	1. Date of contractor arrival		actory) or U (unsatisfactory) for each phase of and specify any problems and/or positive actions	S	U
UF .		a. Adequacy of Contractor/	COR briefing/notification	X	
CONTRACTOR'S	2. Date of contractor departure	b. Adequacy of repackaging		X	
		c. Final clean—up and decor		X	
PERFORMANCE	12-4-87	d. Safety of personnel		×	
		e. Number of trucks used		1	
	and the second s			YES	NO
D. DOCUMENTATION F	RECEIVED Check each document	received by PDO for filing	a. Manifest	×	
			b. Form DD 250 (or DRMS Form 1697)	X	
	DE ANY SPECIFIC COMMENTS YOU OR COMMENTS (on improving this		/ERALL CONTRACTOR PERFORMANCE, Report, etc.)		
Name of PDO submitting	ng report	3. COR Signature			
) Pma 1.		1-1/	11. 5		
2. Printed or typed name of	OMP LEJEUNE, M	4. Date this repor	t submitted	rajona di	
	TER, L.E.	Date this repor	12-4-87		
// // /	0. , ~		0 / 0 /		

OMI OMINI MALAMIDOOD	nerator's US EPA ID No.	Doe	Manifest cument No.	2. Page			the shaded area ired by Federa
B. Generator's Name and Mailing Address	ieu 7 od iziek	2121210	1 1 4 16	-	e Manifest D	ocument	Number
MARINE CORPS BASE	DRMO						
CAMP LETEUNG N.C. 2850	12 13LDG 91	Ola		B. Stat	e Generator's	1D	
Generator's Phone (917.)451-5613	AHH : MR	EGGER	25				
. Transporter 1 Company Name	6.	US EPA ID Num	ber	C. Stat	e Transporter	s ID	The statement of the st
MURCA MENTAL TRANSPORTATIONS	ERUCESIO IKIDIA II	81/151816	316 10 15	D. Tran	eporter's Pho	na Char	1745-008
. Transporter 2 Company Name	8.	US EPA 10 Num	ber	Sept.	e Transporter	COLUMN TO SERVICE	7
		1111	111	Enth loss back	sporter's Pho	PARTICIPAL DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTION DE	
Designated Facility Name and Site Address	10.	US EPA ID Num	ber	G. Stat	a Facility's ID		
SPECIAL WASTE INC.				U.F.	On Z. Pol-		
1713 LEGION Rd.	for her			STATE OF THE PARTY	lity's Phone	ann	
ATHENS, TN 37303	ILIMIDIO	314151417	12. Cont	STATE OF THE PARTY OF THE PARTY.	745-	14.	Lok
US DOT Description (Including Proper Shipping Name	e, Hazard Class, and ID Num	ber)	No.	Туре	Total Quantity	Unit Wt/Ve	
RQ1 WINSTE OIL, COMBUST	RIE LIBIND.	1)A1270					JON, FOO
[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]		10,1100	1 1 1 1 1 1 1 1 1	Chiques managed			E FOC
(FOO), FOOD, FOOD DOOLY	(203)		101011	1 1	1418101	96	225
			1-16				
			111				
							Barrie II.
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Additional Descriptions for Materials Listed Abov	The second secon	-		K Wan	dling Codes for	Wastes I	isted Above
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Approval 580026	型美国			K. Hair			
IN 내용하는 100 개발로 하는데 100 100 100 100 100 100 100 100 100 10	型美国	WCK CO					
APPROVAL 580026  DLA 200-88-D0033 J	TR.O.CYNI PO	0577					
AppRoval 580026  DLA 200-88-D0033 Info	TA DO COOL PO	0577 Saste = n	V- 15	+1115	£AC11141≻	C 410-	72-
APPROVAL 580026	TA DO COOL PO	0577 Saste = n	V- 15	+1115	£AC11141≻	C 410-	7.*
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APPROVAL 580026  DLA 200-88-D0033 J  5. Special Handling Instructions and Additional Info WADTE CONTRACTOR PLEASE RE F. O. BOX B SAVKULLE, W	mation Special M colf Au Colard	OSTTY SASTE IN ESPENDE	C IS	4412	FAKIUTE T	S H1-02	7-
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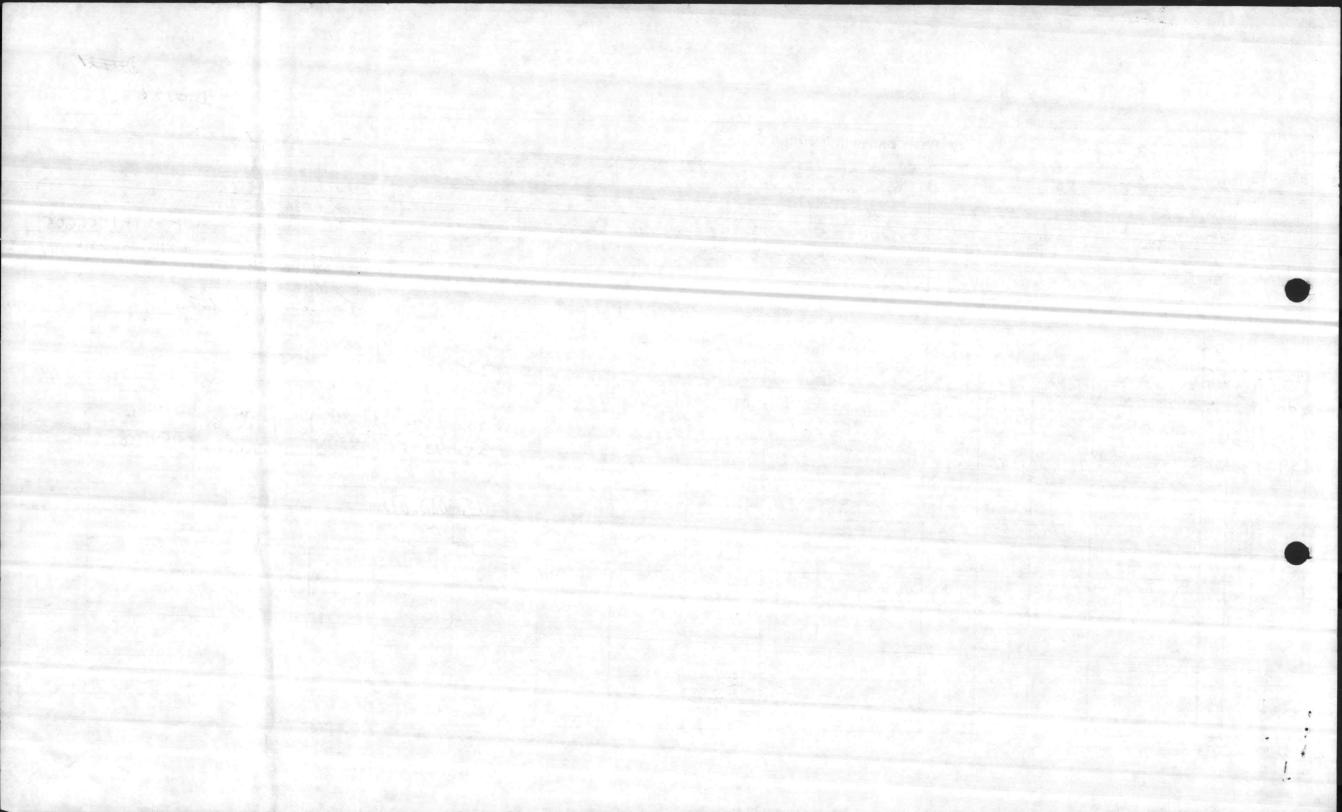


						DELIV	ERY ORDER INVENTORY	(NON PCB)							PIC	KUP RE	PORT	
NERATOR	11	no	INE CORPS &	BASE			EPA NUMBER NC6170022	580		DLA 2	TRACT	NUMBER 88D	0033				TED BY CONTRACTING	20000000000000000000000000000000000000
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GE	OR	SF.	EGGERS				PICKUP LOCATION TANK # 5 891	TANK S 8	89 TANK	57961	THE	UK 5776	2	ETS TSDF NAME			DKD 98105 EPA NUMBER	
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L	01	4	ACTING				DATE RECEIVED BY CONTRACTI	NG C	1-15-8	M)	a	10/64	<u> </u>	AUTHOPIZED O	CONTRACTING OF	ICERS F	REPRESENTATIVE (COR	e)
11	52%	# 8	3 NSN	4	, DTID		5 ITEM NAME US DOT DESCRIPTION	6 STORAGE CONTAINER	STORAGE LOCATION	8 QUANTITY	9 UNIT	10 PRICE	AMOUNT	EPA WASTE CODE	PICKED UP	UNIT	14 PICKUP MANIFEST NUMBER	DATE PICKED
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	00	AB	DIES AN AN WHATE	H93182			SAMPLE 87-5L SEE ATTO HED SAMPLE 87-50	" "	STT-62 HOLOHD BUD	12,500	GL	2.95	36,875°= 51,1625°=	F00/1003 F002	1300	61	00126	12-4-
ZOAA	00	AC	9150-00-016-WASTE	M 93182	Section 1	0003	SEE ATTACHED	" "	5-889 HOLCOMBISHUD 5-891	17.500	C'I	2.95	51,625	FOR FORZ	3500		00126	12-4-
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Há DRMS Jun 86 1786 (Previous edition to be used until exhausted)

(SEE REVERSE FOR ADDITIONAL REMARKS IF APPLICABLE)

PAGE J OF

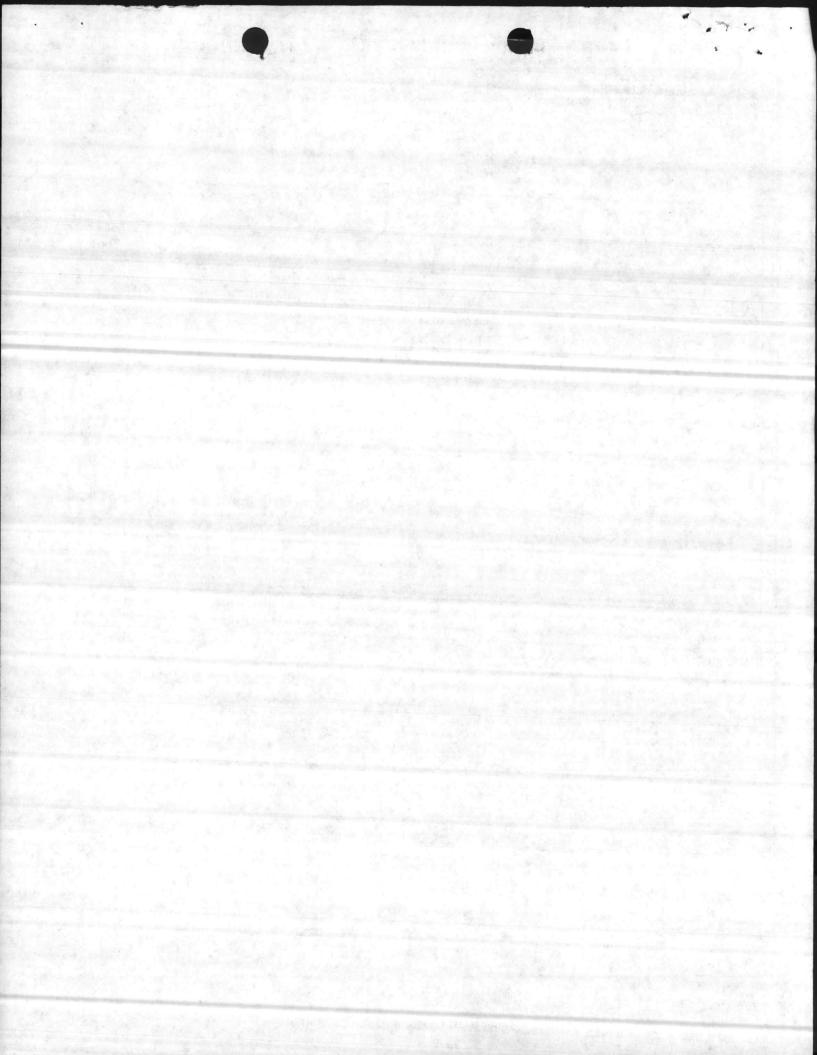


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COLLECTION SU	IMMARY REP. T CON	TRACT NO.	0033	DELIVERY ORDER NO.	175.7%	
	Ö	LA 200-88-1		0001		Seek to
	m and submit it to the DRMS Contri dress of the DRMS Contracting Office			s from the time that the contractor leaventract and/or delivery order.	es the	
	1. Actual location of chemicals	er is included on Fage 1 of the	enciosed co	2. RIC _ 6		
A DESCRIPTION OF		s 3 156		54-2014		
CHEMICAL	1	Touch	0 S-89	3. Accountable DRMO		
COLLECTION SITE	Emp LEIEUN	E, NC. Tork		Compos Legeure,	N	<u>C</u>
	IISCELLANEOUS CHEMICALS CO	LLECTED. (Attach copy of	DD-250 or 1	DRMS-1697, Pickup Report, as applical	ole	
to your contract and	delivery order. If not provided, stat	e why and attach a descriptio	n or copy of	annotated inventory.		
		chemicals collected and the o	quantity of cl	hemicals shown in the contract and/or d	elivery	
order. (attach add	ditional documents as necessary)					
2. Please fill in the colum	nns describing the number of contain	ners requiring overpacking, rep	oacking, drair	ning,etc., if any.		
CLIN	ITEMS	QUANTITY		REMARKS		
	1. Date of contractor arrival	3 Please check either S (s	satisfactory)	or U (unsatisfactory) for each phase of		
C. EVALUATION	1. Date of contractor arrival			ify any problems and/or positive actions	s	U
	12-3-87	encountered, if any.				
OF	12-2-01	a. Adequacy of Contra	actor/COR br	riefing/notification	/	
CONTRACTOR'S	2. Date of contractor departure	b. Adequacy of repack	aging		1	
PERFORMANCE	10000	c. Final clean—up and	decontamina	ation	V	5.73
PERFORMANCE	12-3-87	d. Safety of personnel			1	
		e. Number of trucks us	sed	23.00	2	NO
D. DOCUMENTATION F	RECEIVED Check each documen	t received by PDO for filing	Га	Manifest	YES	NO
	Check dadii documen	treceived by 1 DO 101 111111g	The same of the sa	Form DD 250 (or DRMS Form 1697)	1	
E DEMARKS INCLU	DE ANY SPECIEIC COMMENTS V	OLI MAY HAVE BEGARDIN		L CONTRACTOR PERFORMANCE,	-	
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						The Crosses
		la con c/a	2			
1. Name of PDO submittin	ng report	3. COR Sign	ature	11/		
2 Printed or typed name	of COR!	Date this	report submi	No New		- 4.70
2. Printed or typed name of	laster L.	4. Date this	Papert submi	3-17		
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THE REAL PROPERTY OF THE PROPE Man Cont Com 5-93 SA Line Con Ligition AC NORTH CADLINA HAZARDOUS WASTE

INIFEST Sim Approved. OMB No. 2050-0039. Expires 9-30-86

П	UNIFORM HAZARDOUS 1. Generator's US EPA	io No. Dialaisibioidi	Manifest ocument No.	2. Page 1	Information is not law.	on in t	he shaded areas ed by Federal
1	MADINE CORDS BASE DRMO		Lucinglas Million Com	ACTOR AND DESCRIPTIONS OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUM	Vanifest Docu	ment N	lumber
	CAMPLETEUNE, NC 28542 BLUG			8. State	Generator's ID		
1	<ol> <li>Generator's Phone (9/9) 451-56/3 ATTN: N</li> <li>Transporter 1 Company Name</li> <li>6.</li> </ol>	VR EGGERS	nbor	C State	runsporter's	5	
		JID10181915151					381-4999
1	7. Transporter 2 Company Name 8.	US EPA ID Nur	nber	E State	esperier's Phone		
1	Designated Facility Name and Site Address     10.	US EPA ID NUI	nber	BOREL BUTTON	acitity's 10		
	SPECIAL WASTE INC.						
	1713 LEGION RI.	15,00,000	ra a di a	H. Facility	5 Phone 1745-91	222	
		VIDI0131415191	12. Cont	Biners	13. Total	14. Unit	1
	11. US DOT Description (Including Proper Shipping Name, Hazard Class, a	no its ivanion)	No.	Type	Quantity	Wt/Vol	Waste No.
GE	" RQ1 WASTE OIL, COMBISTIBLE						Fool, Fool
E	NAI270 (FOOL, FOOZ, FOOZ, D	(100	001	TIT	5500	G	Food, Dool
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	<ol> <li>GENERATOR'S CERTIFICATION: I hereby declare that the contents proper shipping name and are classified, packed, marked, and labeled, according to applicable international and national government regulation.</li> </ol>	and are in all respects in				зү	
	If I am a large quantity generator, I certify that I have a program in place economically practicable and that I have selected the practicable mather future threat to human health and the environment; OR, if I am a small the best waste management method that is available to me and that I	e to reduce the volume are ad of treatment, storage, o quantity generator, I have	r disposal curr	ently availa	ble to me which	minimi	zes the present and
	Printed/Typed Name	Signature	11	1-	1 1 22		Month Day Year
-	HUNTER L.K.	Bellenen	g. Mu	ulle	THE REAL PROPERTY.	and the second second	1130387
RA	17.Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name	Signature					Month Day Year
RANSP	Henry wells	Kenn	20	ell	,	Name and Address of the Owner,	19/10/15/2
ORT	18.Transporter 2 Acknowledgement of Receipt of Materials Printed/Typeg Name	Signature	licen				Month Day Year
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	19.Discrepancy Indication Space		4 94 - 15				
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L		and the same of th			ocaman sinemati ne disent	and the state of t	particul different Property Market (Local Consider Local Consider Local Consider Local Consider Local Consider
TY	20.Facility Owner or Operator: Certification of receipt of hazardous Printed/Typed Name	Signature	his manifest	except as	noted in Item	19.	Month Dey Year
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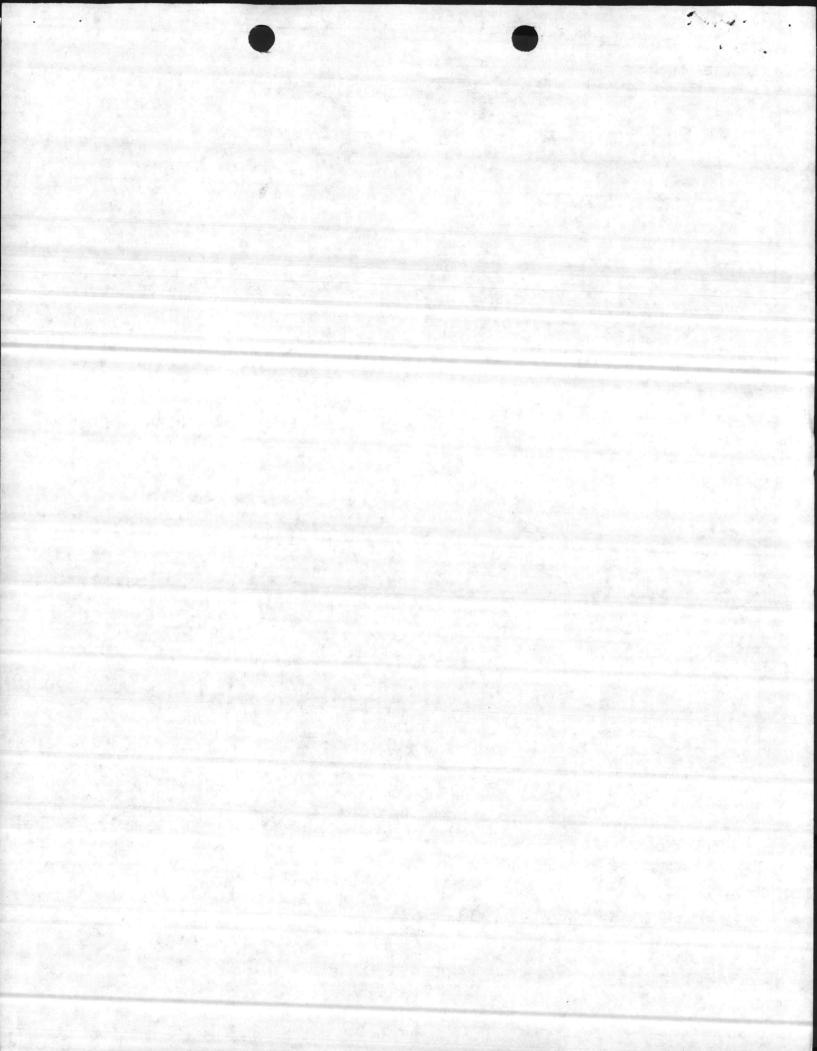


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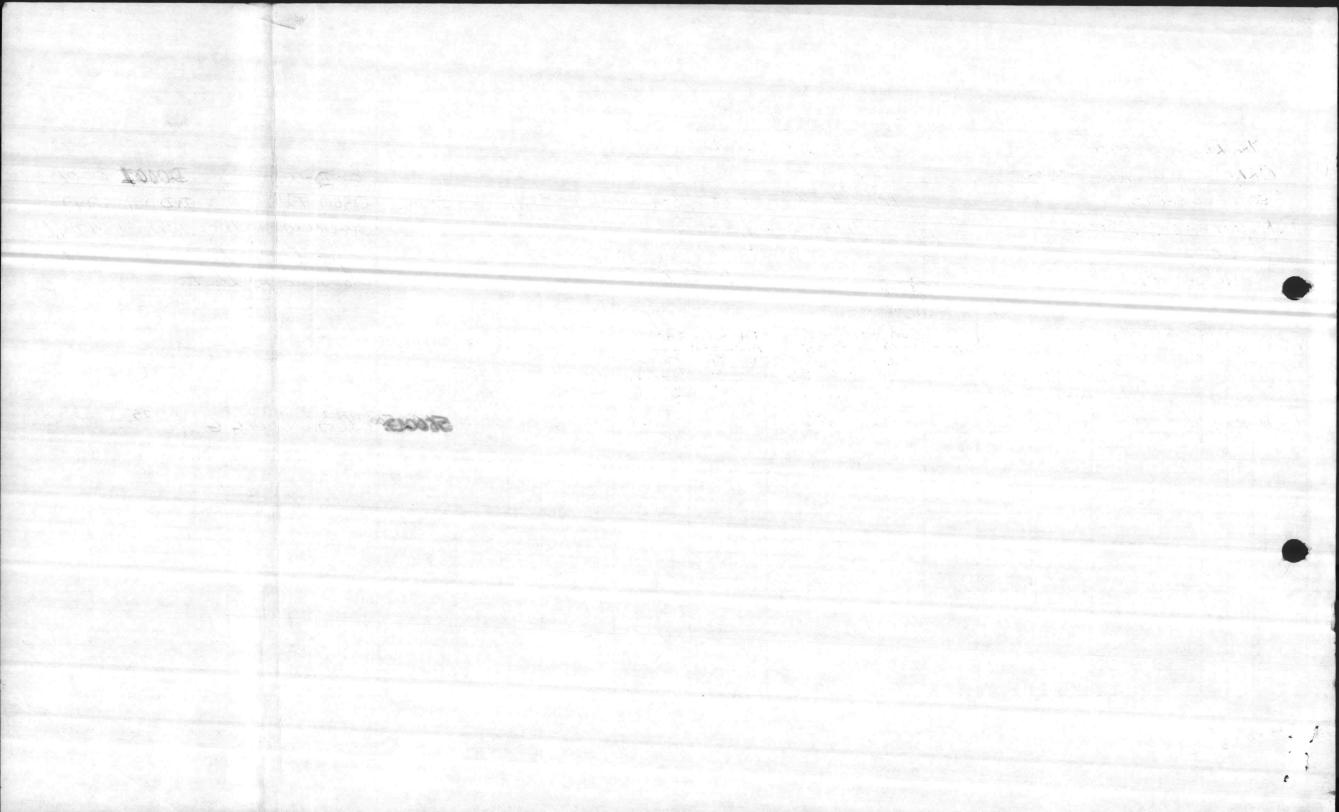
IORTH COLINA HAZARDOUS WASTE ANIF

Please print or type. (Form designed for use an elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-8 1. Generator's US EPA ID No. information in the shaded areas is not required by Federal law. UNIFORM HAZARDOUS Manifest WASTE MANIFEST WICIGIA 1710102 251810101011 Generator's Name and Mailing Address
MARINE CORPS BASE Manifest Document Number Demo CAMPLETEUNE, NC 28542 BLDG 906 B. State Generator's ID Generator's Phone ( 919 1451-5613 ATTAN MR EGGERS C. State Transporter's ID D. Transporter's Phone GIS/381-4 INC Company Nam Sco E. State Transporter's F. Transporter's Phone Designated Facility Name and Site Address G. State Facility's ID SPECIAL WASTE TAK. H. Facility's Phone ATHENS, TN 37303 615 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Waste No. KO 1 WASTE OIL, COMBUSTIBLE GOVID, NAI270 Fool, Foo2 FOOL, FOO2, FOO3, DOOL R 0 R J. Additional Descriptions for Materials Letter Ahm K. Handling Codes for Wastes Listed Above APPROVAL 580026 SPECIAL WASTE INC. IS THIS FICILITIES PLEASE DIRECT ALL CORRESPONDENCE AND BILLING HAZARDOUS WASHE CONTRACTOR. P.O. BOX B SAUKVILLE, WI 63080 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment, OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. Printed/Typed Name Month Day UNTER 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Frank Hancack

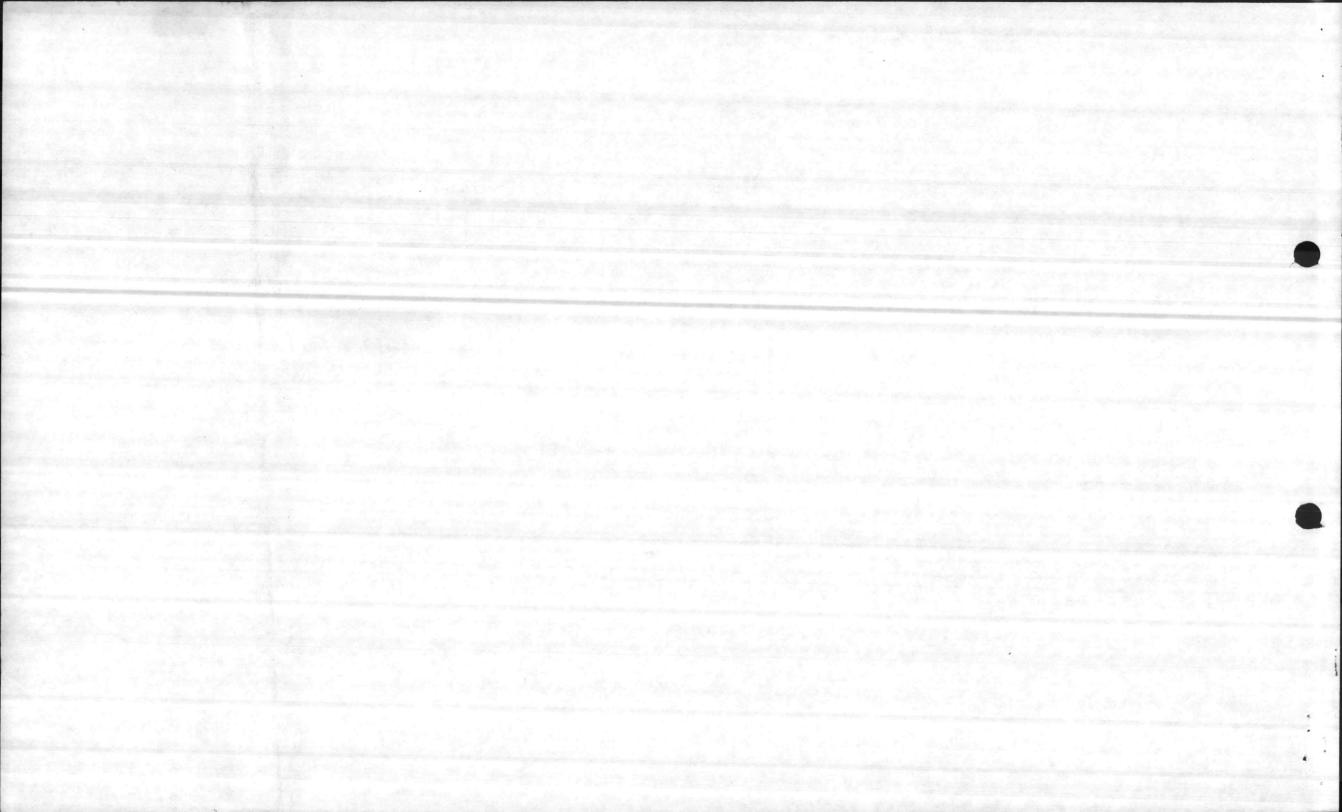
18. Transporter 2 Acknowledgement of Receipt of Materials - Name Signature Month Day 19. Discrepancy Indication Space 20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature Month Day Year



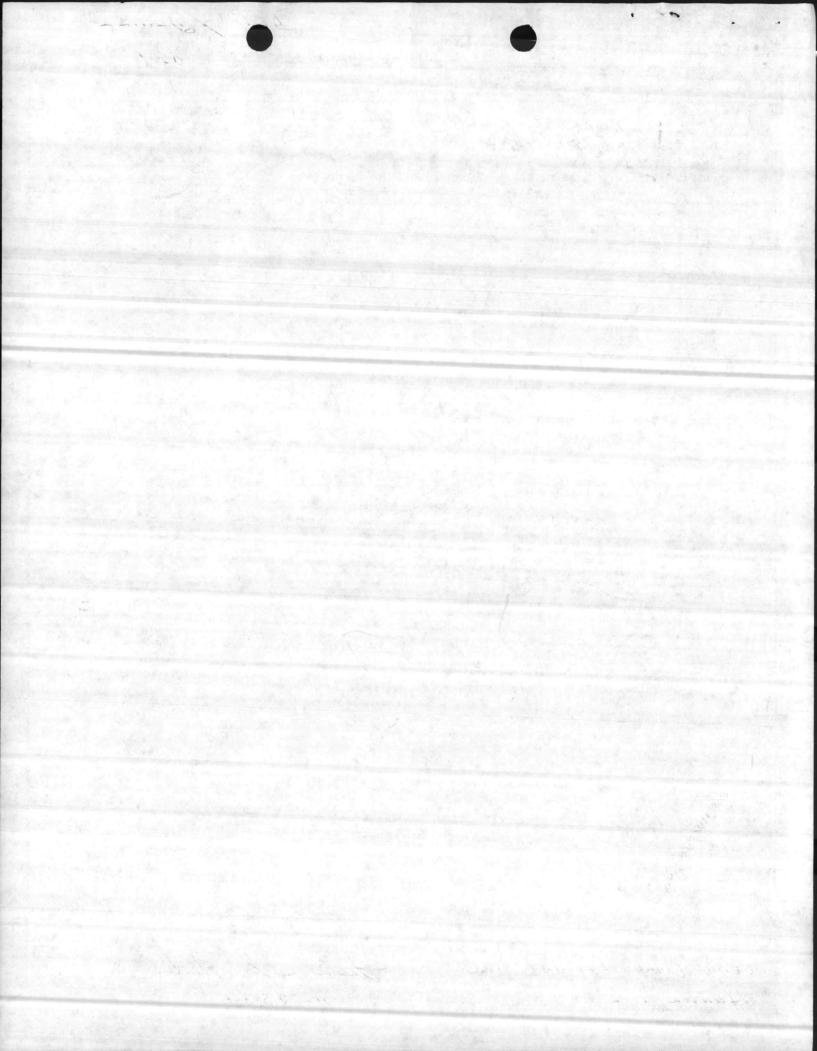
						DELI	VERY ORDER INVENTORY	(NON PCB)							PIC	CKUP F	REPORT	
GENERATO	PAR	INE	Carps BASE	5	1000		NC 6/700	22540		AWARDED CON	TRACT	NUMBER		SHADED	PORTIONS TO BE	COMPL	ETED BY CONTRACTING	OFFICE
6,	ano	1	ETUENE NC	2854	2		DRMO LETUENE	4 14 1					and the second	CONTRACT NU	MBER 0033 RANSPORTER NA		DELIVERY ORDER NUM	MER 00/
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(9/9) GENERATO	R REC	S/-	UMBER 56/3 565 NUMBER	52			AUTOVON PHONE NUMBER 484-561	13/565	2					SPECIAL	WASTE T	WC.	TND03454	714/
DATE SENT	DATE SENT TO CONTRACTING BY CONTRACT						17-15	= 47				30 10 10 10 10 10	A ROW AUTHORIZED OF	CONTRACTING OF	FICERS	REPRESENTATIVE (COR	1	
CLIN	2	FIX	3 NSN	4	DTID		5 ITEM NAME US DOT DESCRIPTION	6 STORAGE CONTAINER	7 STORAGE	8 YTITHAUD	9 UNIT	10 PRICE	AMOUNT	12 EPA WASTE	3 PICKED UP	Marian Company	14 PICKUP MANIFEST NUMBER	15 DATE
		14.	9150-00-0:1-WASTE	DODAAC	DATE	SERIAL	SEE ATTACHED	TANK	TA RAWA TOVIALE STT-61	,				CODE	QUANTITY	UNIT	LINE CODE	PICKED UP DDMMYY
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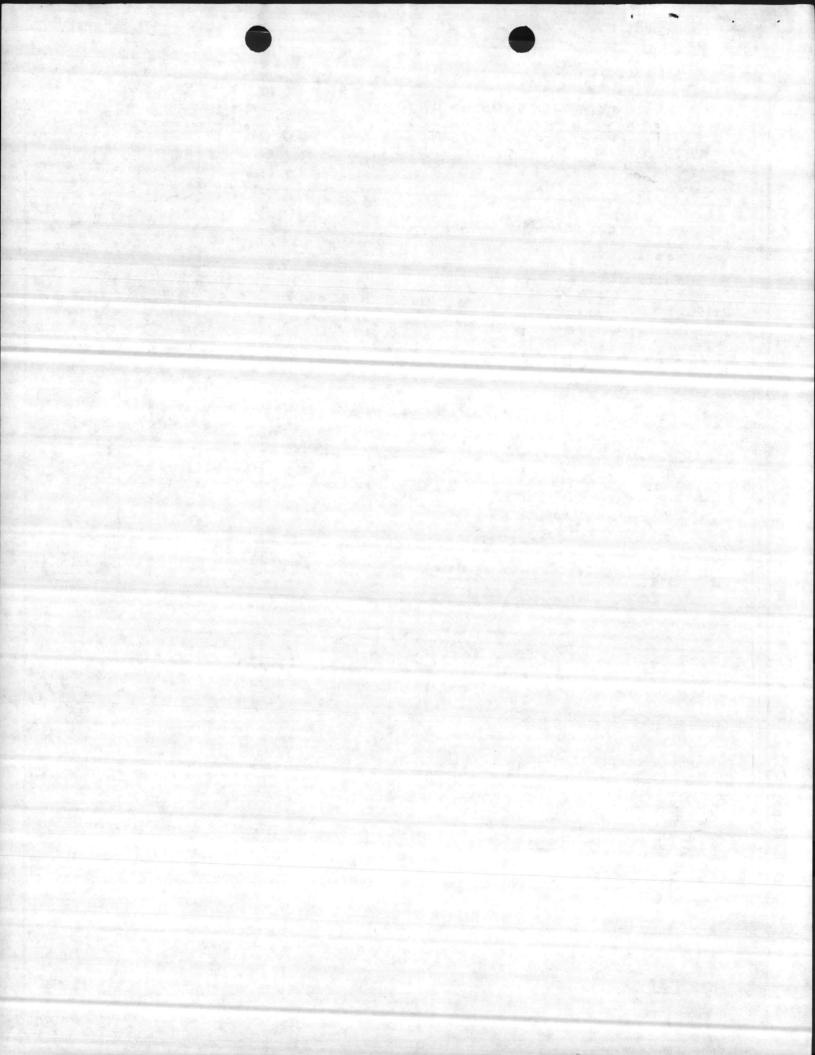
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		ional documents as necessary)	nemicals conected and the	quantity of chem	nedia strovvii li	the contract and/or d	envery	
		the party of the p						
le ja								
2.	Please fill in the columns	describing the number of container	s requiring overpacking, re	epacking, draining	etc., if any.		1200	
	CLIN	ITEMS	QUANTITY		REMA	ARKS		
-		Date of contractor arrival	3. Please check either S	(satisfactory) or I	1 (unsatisfacto	ory) for each phase of		
C.	EVALUATION					and/or positive actions	S	U
		11-23-87	encountered, if any.	Annual Control				
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	CONTRACTOR'S	2. Date of contractor departure	b. Adequacy of repac				1	
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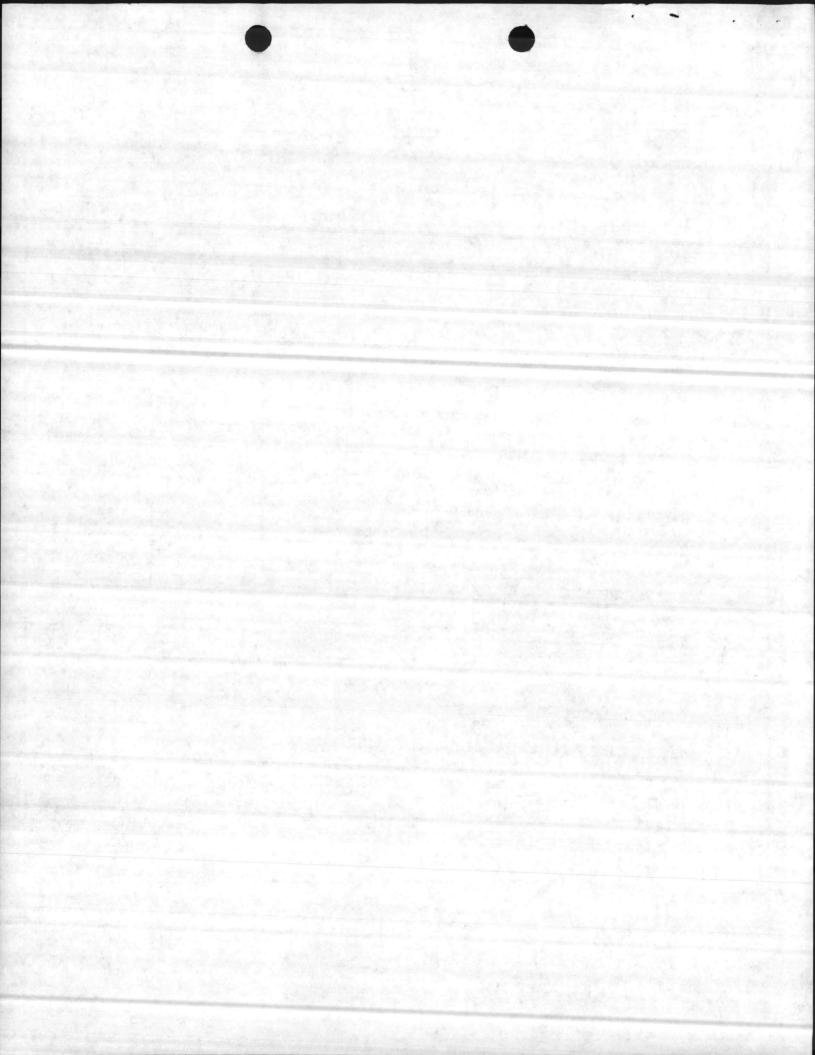
UNIFORM HAZARDOUS . Generator's US E		Vanifest ument No.	2. Page		on in t	he shade ed by f	d areas
3. Generator's Name and Mailing Address	10/20/5/19/00/18	1/12/2	of A Stat	l law.			
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9. Designated Facility Name and Site Address 10.  Special Waste Inc.  1713 Legion Rd	US EPA 10 Numb	er		e Facility's (O			
	ND0314151417	111411	CA.	5/745-9	122	2	
11. US DOT Description (Including Proper Shipping Name, Hazard Class,	and ID Number)	12. Cont.	Type	13. Total Quantity	14. Unit Wt/Vol	Was	I. te No.
1 RQL, Wester Oil, Combus liquid, NA1270, FOOI, FOO	stille 2, FOO3, DOO!		Туре		-	Fool	\$1856B
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J. Additional Descriptions for Materials Listed Above  Q. App. 580026 Clist			K Han	ding Codes for W	astes Lis	sted Above	
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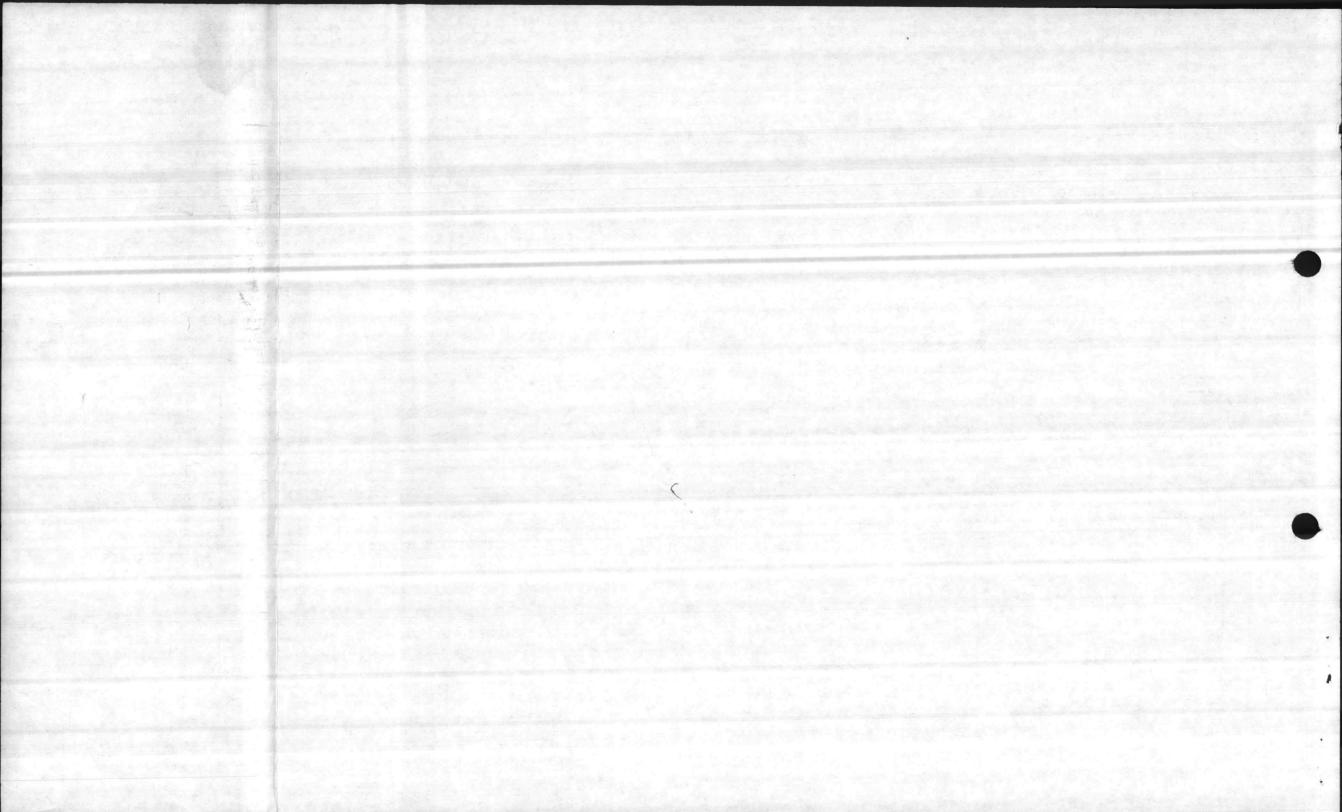
**NORTH CAROLINA HAZARDOUS WASTE MANIFEST** 

Ple	ase print or type. (Form designed for use on elite (12-pitch) typewriter.)	ASIE		oproved. OMB No	2050-0039. Ex	pires 9-30-81
	UNIFORM HAZARDOUS 1. Generator's US EPA ID No. MILEST NC. G. 1. 17 00 22 5 8 0 10 00	anifest ment No.	2. Page of	1 Informati	on in the sharequired by	ded areas
	MARING CORPS BASE  CAMPLETEUNE N.C. 28542  DRMO P  BLD 906  AT 11 MR FIGGERS			Manifest Dock		
	4. Generator's Phone (9/9 ) 4/5/1-56/3  5. Transporter 1 Company Name 6. US EPA ID Number	r	C. State	Transporter's	0	
	Environmenta Transporta Ton Services 10/10/18/10/16/16	6195	SECTION STATES	sporter's Phone, Transporter's	The Land of the	-2000
	111111111	11	F. Tran	sporter's Phone		
	9. Designated Facility Name and Site Address 10. USEPAID Number 1713 Legion Rd	r		racility's 10		
	Athens, TN 37303 TINDIO13141514171	1411	613	1745-	9222	2
	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Conta	Type	13. Total Quantity	14. Unit Wt/Vo W	I. aste No.
G	a RQI, Waste Oil Combustible liquid				Foo	, Fore
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	DLA 200-88-Dog O. Dool P.O. 0549 /	7.A.A		fling Codes for W	istes Listed Abo	
	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully proper shipping name and are classified, packed, marked, and labeled, and are in all respects in propactions according to applicable international and national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and to economically practicable and that I have selected the practicable method of treatment, storage, or displaying threat to human health and the environment; OR, if I am a small quantity generator, I have made the best waste management method that is available to me and that I can afford.  Printed/Typed Name Signature  Signature	exicity of wa	on for tra	erated to the degr	ee I have determ	resent and and select
	Hurten, Laurence F. Hanne	1 1	luce	tes	1/1/1	Day Year
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TRANSPORTER	Printed/Typed Name  JEFFREY D. Mott	04	m	T	Month	Day Year 2.3.8.7
000	18.Transporter 2 Acknowledgement of Receipt of Materials				1000	
TE	Printed/Typed Name Signature			1. 44	Month	Day Year
R	19.Discrepancy Indication Space	THE REAL PROPERTY OF				
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1	20.Facility Owner or Operator: Certification of receipt of hazardous materials covered by this r	manifest -	voort .	noted in the	10	- 14
Y	Printed/Typed Name Signature	mannest e	veaht 98	noted in Item		Day Year
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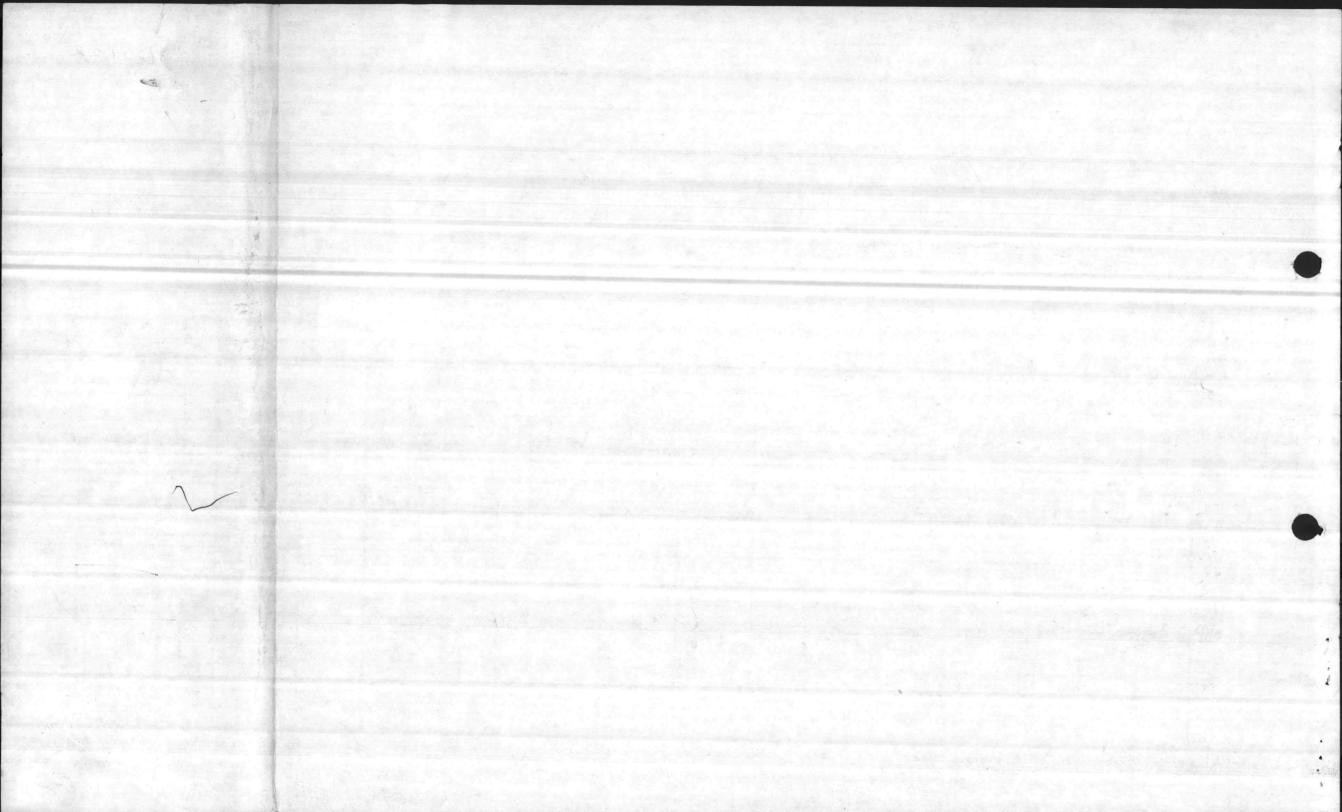
EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.



					DELIV	ERY ORDER INVENTORY	(NON PCB)							PIC	KUP RE	PORT	
			and the transfer of the second			EPA NUMBER			DLA 2	TRACT	NUMBER PS-D-	0033	SHADED	PORTIONS TO BE		TED BY CONTRACTING	
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OR SE	OKSE	EGGERS				PICKUP LOCATION TANK \$ 5 891	TANK 58	89 TANK	5/76/	142	K 31/6		TSDF NAME	_ ^		EPA NUMBER TND 0345	4714
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			150-00-016-WASTE	DODAAC	DATE	SERIAL	SES ATTACHED		STT-61	12,500	GL	235	3/25,00					
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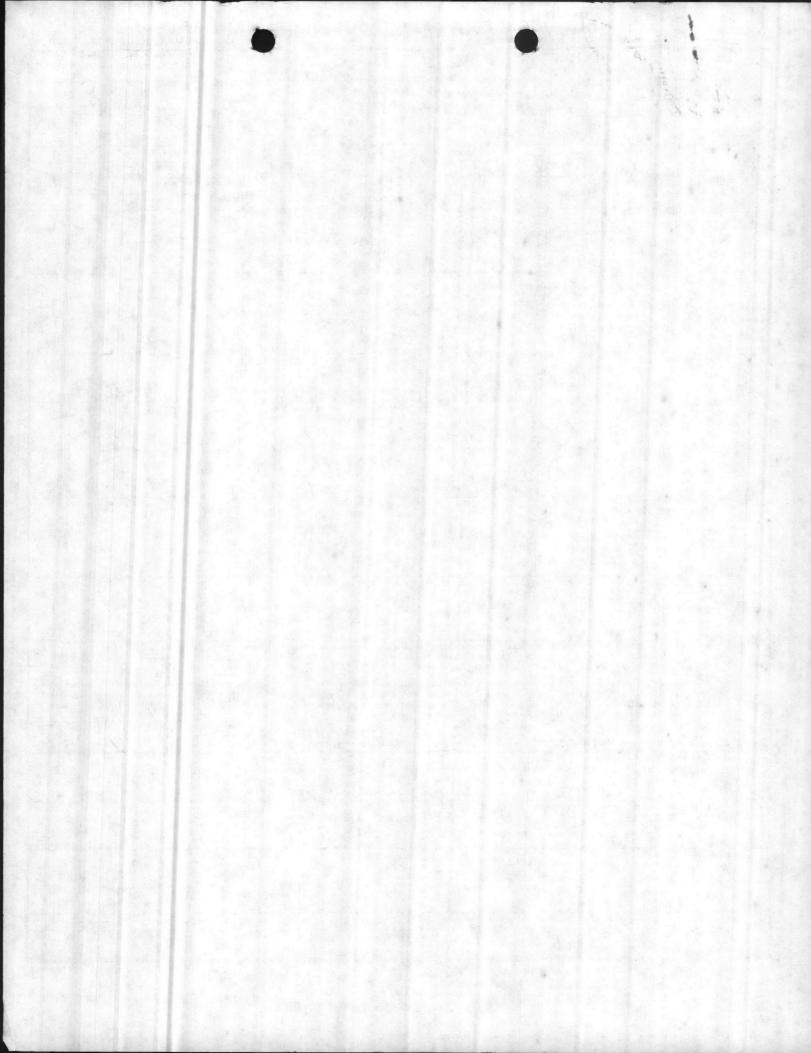


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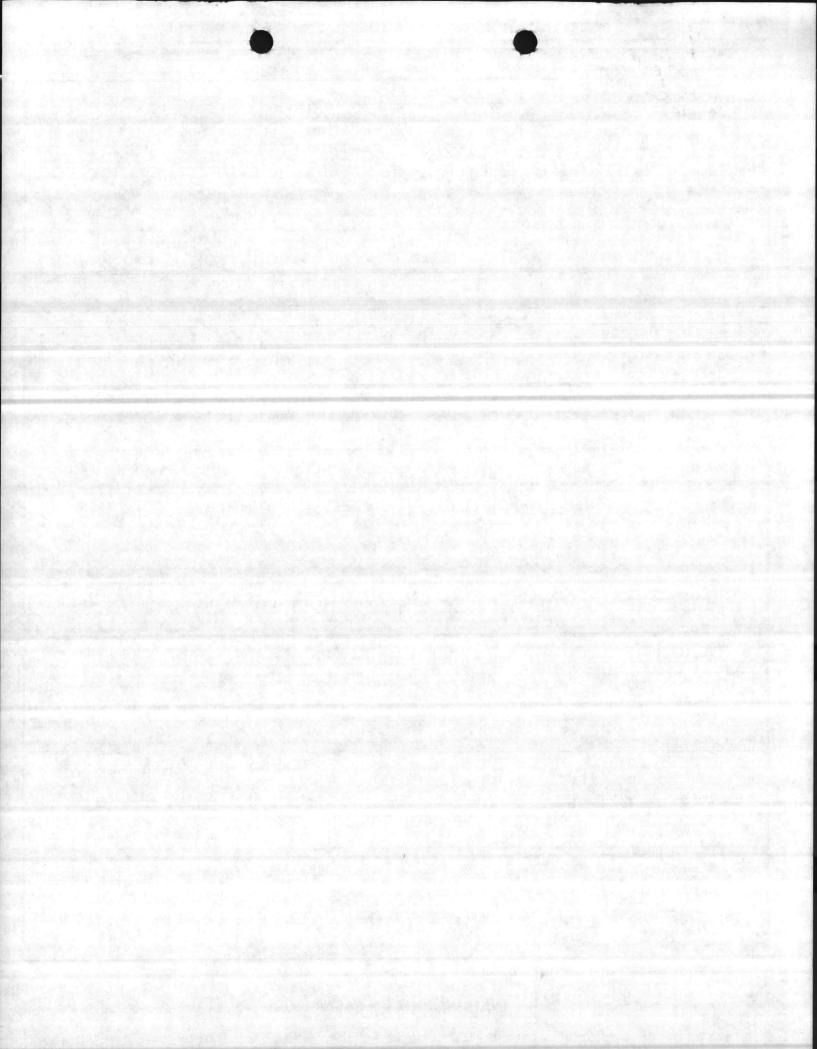
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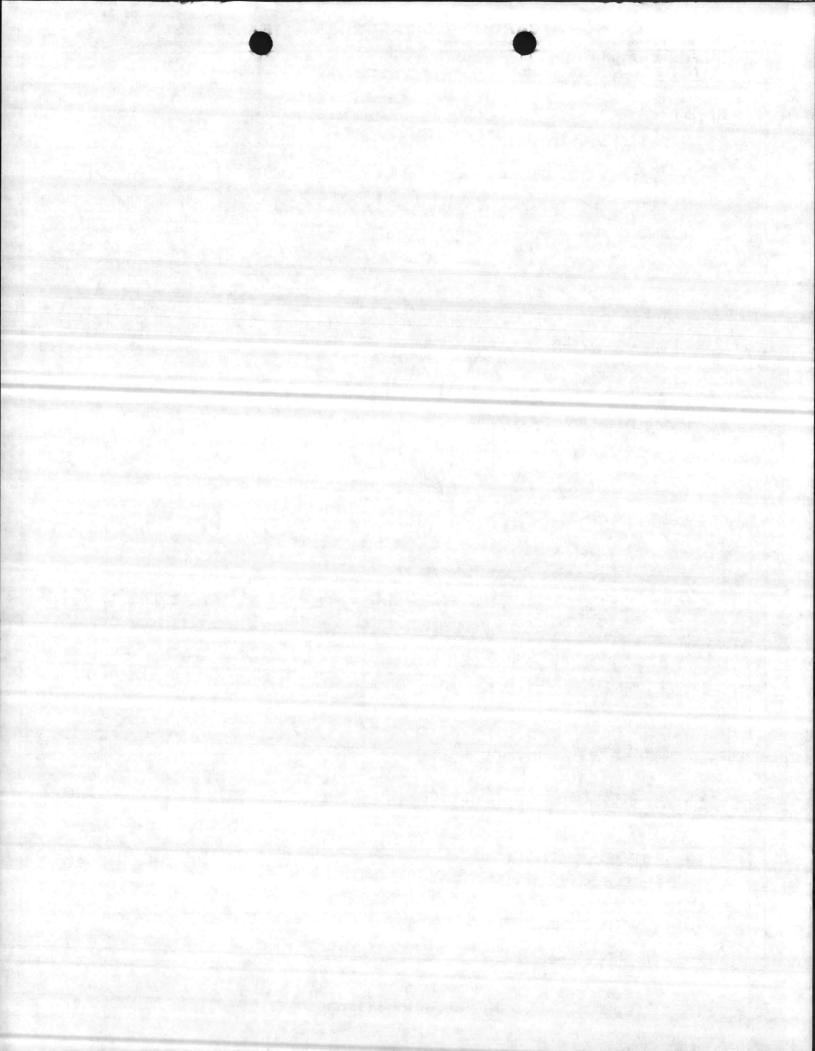
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3. Generator's Name and Mailing Address MARINE CORPS BASE CAMP LETEWIE N.C. 28542	DRMO = BLD 906 ATO! MR EGGERS			Manifest Doc		Number
4. Generator's Phone (919) 451-5613  5. Transporter 1 Company Name	6. US EPA ID Num	ber	C State	Transporter's	ID	
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16. GENERATOR'S CERTIFICATION: I hereby declare that the proper shipping name and are classified, packed, marked, are according to applicable international and national governme	nd labeled, and are in all respects in p	lly and accur roper conditi	rately desc ion for trai	cribed above by asport by highway	ау	
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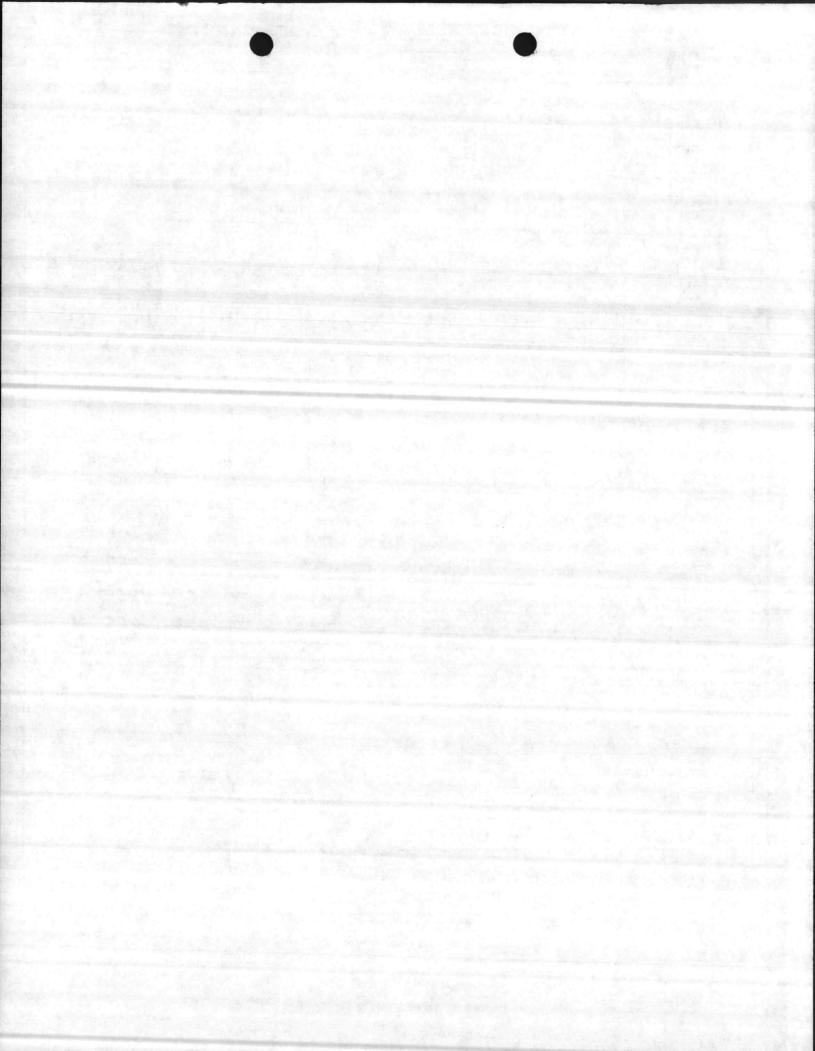
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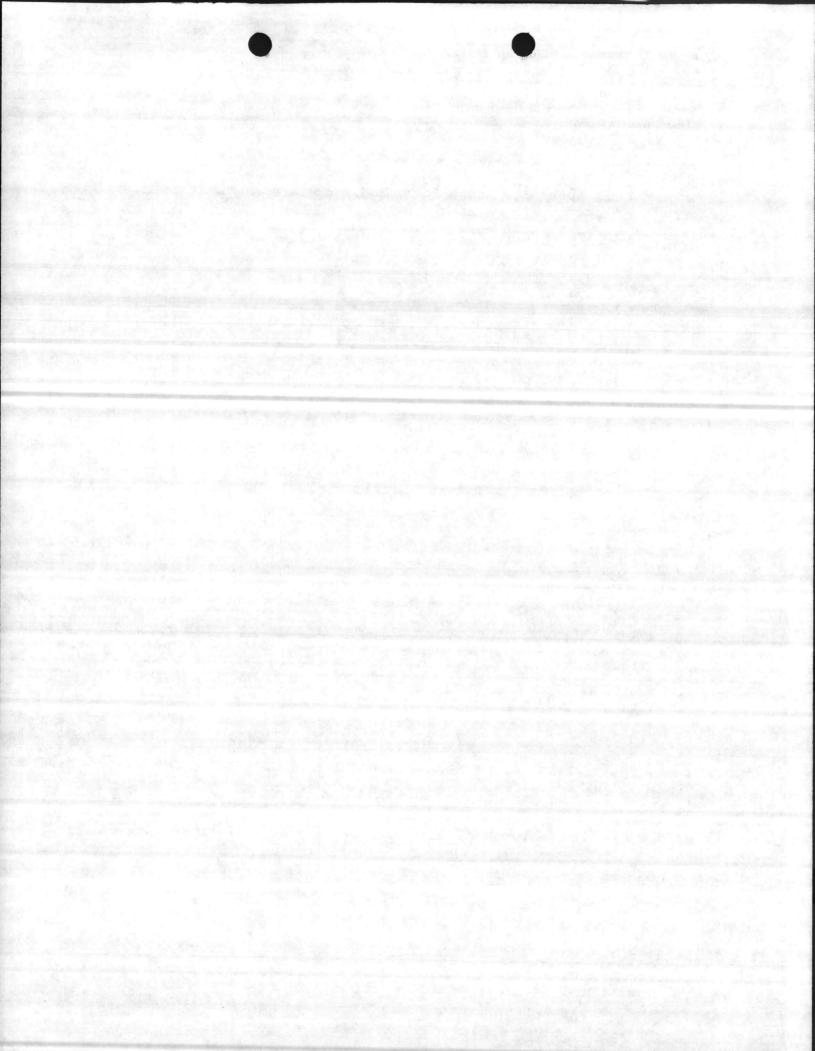
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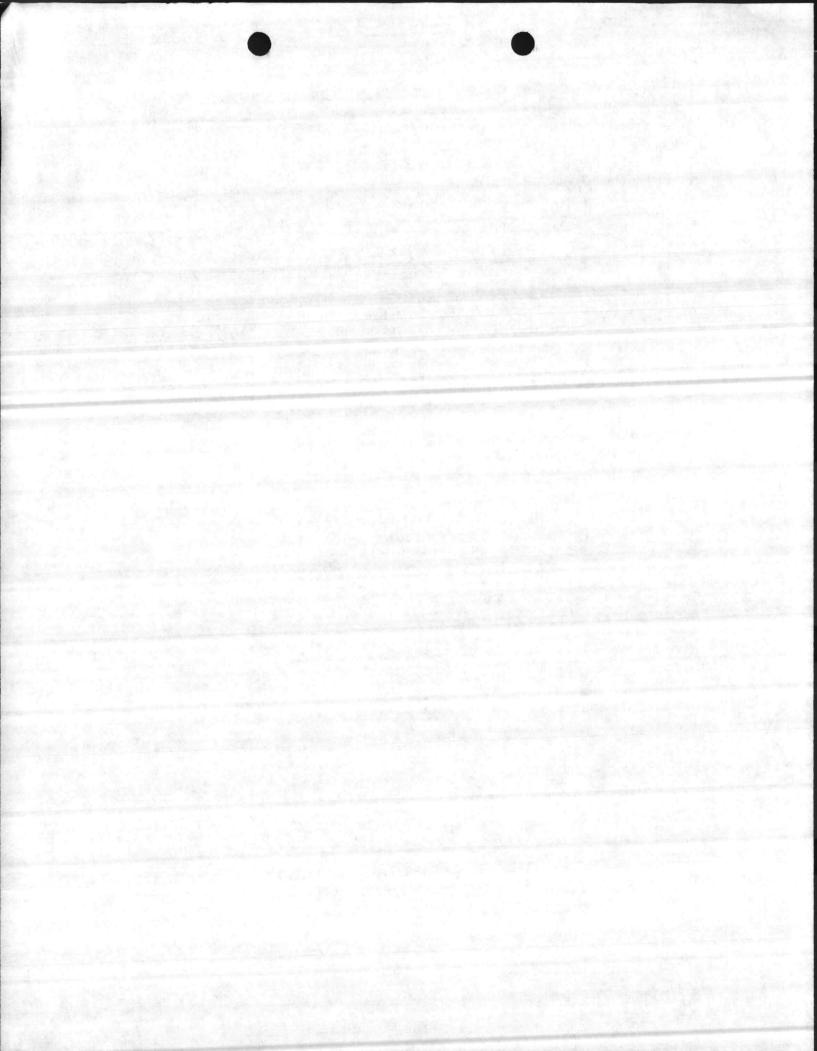
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Indiana State Board of Health
P.O. Box 7035
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2650-0039 9-30-88 Form Approved OMB No. 2000 0404-Expires 7-91-86

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Generator's Phone (919) 45	1-5613	ATTN; GEOVE	E EGG	6010	B. State Gen	erator's ID	
Transporter 1 Company Name	7 00.0	6. US EPA ID Number	15 56	PIG	C. State Tran	sporter's ID	15/381-4
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P.O. Box 7035

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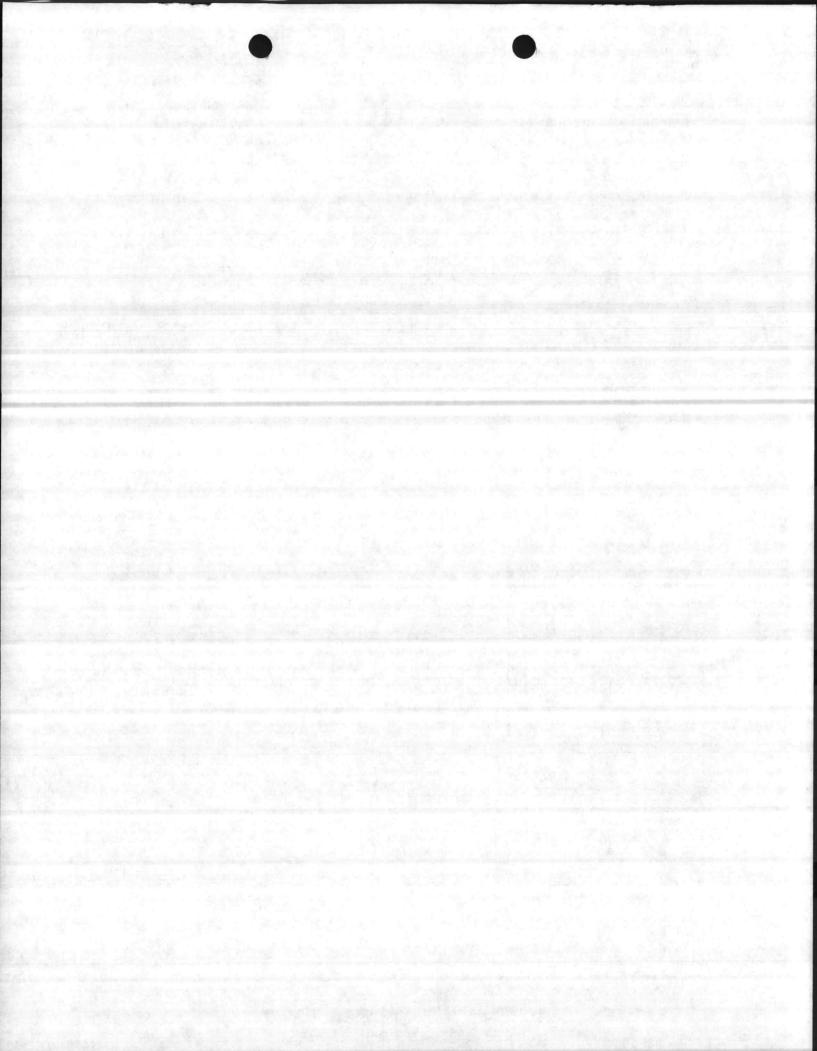
UHWM 2/LP2

Control of the contro	erator's US EPA ID No.		anifest	2. Page 1 of	Information in	the shaded areas
WASTE MANIFEST	6/1/20/02/2/5	化三次进程程序设置设施设计的设定	ment No.	1	is not required	d by Federal law
Generator's Name DRMO	Bldg 906	4-00	1 -11	A. State Manie	fest Document	Number
Generator's Phone (G19) 451-56	SEUNE, NC			B. State Gene	orator's ID	
Generator's Phone (919) 451-56.  Transporter 1 Company Name	6 US EPA ID Numb		6600	C. State Trans	sporter's ID	
OSCO INC. Transporter 2 Company Name	TW DOGS	9 55 8	1919	A CONTRACTOR OF CARS OF	r's Phone	5/381-499
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11. US DOT Description (Including Proper Shipping Name	e, Hazard Class, and ID Number)	No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
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J. Additional Descriptions for Materials Listed Above	STATES OF SAME BUILDING	111	K Handlir	g Codes for Wa	stee Listed Abo	
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15. Special Handling Instructions and Additional Information MATE 9.  16. MATE 9.  17. MATE 9.  18. MATE 9.  19. MATE 9.  10. MATE 9.  11. GENERATOR'S CERTIFICATION: I hereby deciare that He and labeled, and are in all respects in proper condition for If I am a large quantity generator, I certify that I have a program have selected the practicable method of treatment, storage small quantity generator, I have made a good faith effort to	he contents of this consignment are fully, transport by highway according to appliam in place to reduce the volume and toxic, or disposal currently available to me who minimize my waste generation and self	and accurately desicable international	cribed above be and national gotted to the degree	LA 200-6	ame and are classons.  to be economical health and the enable to me and that	BB Dr.O. Of sified, packed, marked ly practicable and that vironment, <b>OR</b> , if I am a it I can afford.
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PA Form 8700-22A TROV. 11-86).

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RETURNED TO THE GENERATOR BY THE T.S.D.



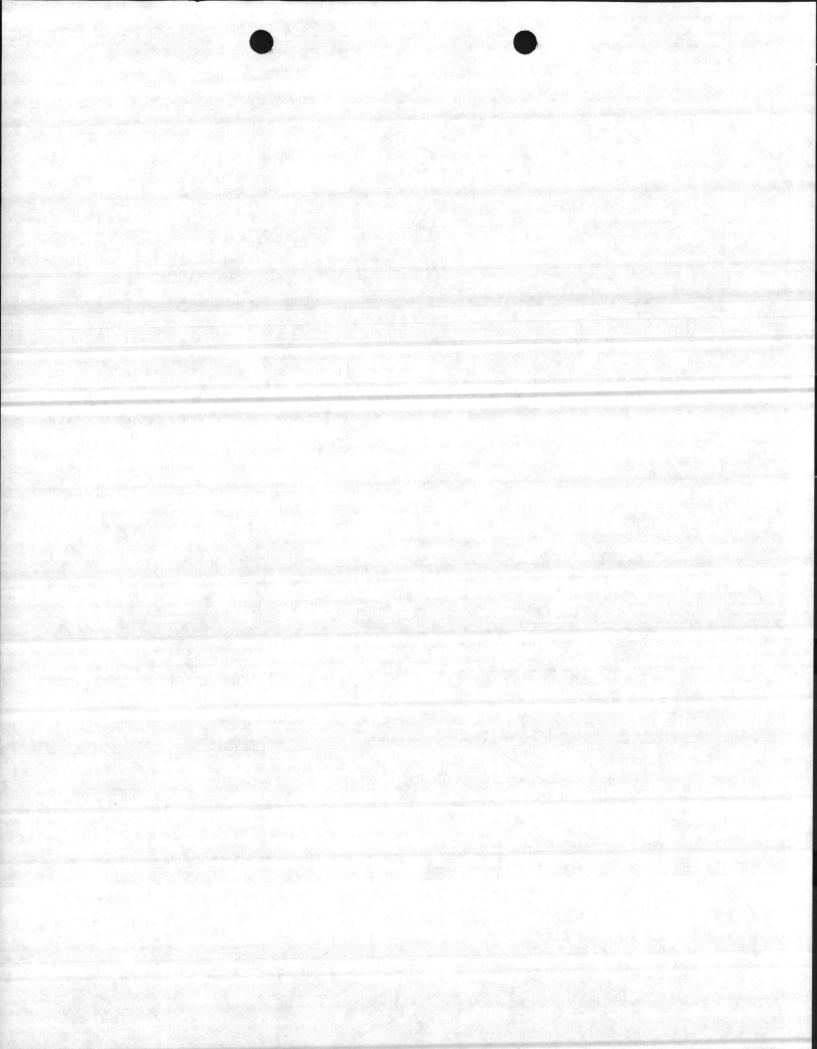


Indiana State Board of Health P.O. Box 7035 Indianapolis, IN 46207-7035

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

2050-0039 9-30-88 Form Approved OMB No. 2000,0404 Expires 79186

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WASTE MANIFEST NIGGITODA 358	3000	1128	1 1-3	7	y Federal law
Generator's Name  DRMO BHS 906  TTN GEORGE MARINE CORPS OBASE  ELLES CAMPULE JEUNE NC 24545	2		A. State Manifest IN 053 S	340	ımber ::
Generator's Phone (9/9) 45/- 56/3			All manes are		
Transporter 1 Company Name  6. US EPA ID Number  7 N D 89  Transporter 2 Company Name  8. US EPA ID Number	। । ।	0119	C. State Transport O. Transporter's P E. State Transport F. Transporter's P	hone 6/5	7381-4
Designated Facility Name and Site Address SYSTE A CORPORATION LONGSTAR CEMEN LIMEDALE RA	T		G. State Facility's H. Facility's Phone		
GREENCASTIE, INDIANA INDIOIOIG	141/19	21/2	317-6	53-2	2606
US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
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5. Special Handling Instructions and Additional Information Special WASTE FOX HAZAXOBUS WASTE, Please Route All	- ANC. Corre	3,000 3,000	LA QOO-81	8-00	11. ng
5. Special Handling Instructions and Additional Information Special WASTER HAZAKOBUS WASTER PIEASE ROUTE ALL  O. P.O. BOX B, SAUKUILE, WIT  16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and	5308	SO D	LA 200-81	8-ba	PYQ E E
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5. Special Handling Instructions and Additional Information  A HAZAKOUS UNASTE, PIEASE ROUTE All  16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and and labeled, and are in all respects in proper condition for transport by highway according to applicable If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of have selected the practicable method of treatment, storage, or disposal currently available to me which is small quantity generator, I have made a good faith effort to minimize my waste generation and select the printed/Typed Name  Printed/Typed Name  Signature  Printed/Typed Name  Signature  Signature  Signature  Signature  Signature  Signature  Signature	accurately describe international au diffusate generate minimizes the prine best waste minimizes the principle of the principle o	sibed above by nd national go ad to the degree as and futures.	proper shipping name an vernment regulations.	d are classified economically prand the environme and that I ca	packed, marked, acticable and that I ment. OR, if I am a in afford.  Day  Pate  Day  Yea  Day  Yea
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5. Special Handling Instructions and Additional Information  A HAZAKOUS UNATE, Please Route All  O. P.O. BOX B. SAUKUILE, UUT  16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and and labeled, and are in all respects in proper condition for transport by highway according to applicable if I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity o have selected the practicable method of treatment, storage, or disposal currently available to me which small quantity generator, I have made a good faith effort to minimize my waste generation and select the Printed/Typed Name  Printed/Typed Name  Signature  Signature  Printed/Typed Name  Signature  Signature  Signature  Printed/Typed Name  Signature  Signature  Signature  Signature  Signature  Signature	accurately describe international au diffusate generate minimizes the prine best waste minimizes the principle of the principle o	sibed above by nd national go ad to the degree as and futures.	proper shipping name an vernment regulations.	and are classified economically prand the environme and that I ca	packed, marked, acticable and that ment, OR, if I am a in afford.  Day  Pate  Date  Date
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5. Special Handling Instructions and Additional Information  A HAZAKOUS UNASTE, PIEASE ROUTE AII  16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and and labeled, and are in all respects in proper condition for transport by highway according to applicable If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of have selected the practicable method of treatment, storage, or disposal currently available to treatment, storage, or disposal currently available to me which small quantity generator, I have made a good faith effort to minimize my waste generation and select the Printed Typed Name  Printed Typed Name  Signature  Signature  Signature  Signature  Signature  Signature  Signature	accurately describe international are five states of the s	So D  ribed above by  nd national go  d to the degree  esent and futur  anagement m	proper shipping name an vernment regulations. It have determined to be ere threat to human health shod that is available to referred.	and are classified economically prand the environme and that I ca	packed, marked, acticable and that I ment, OR, if I am a in afford.  Day Yea Date





Division of Land Pollution Control - Manif	
Indiana State Board of Health	
P.O. Box 7035	

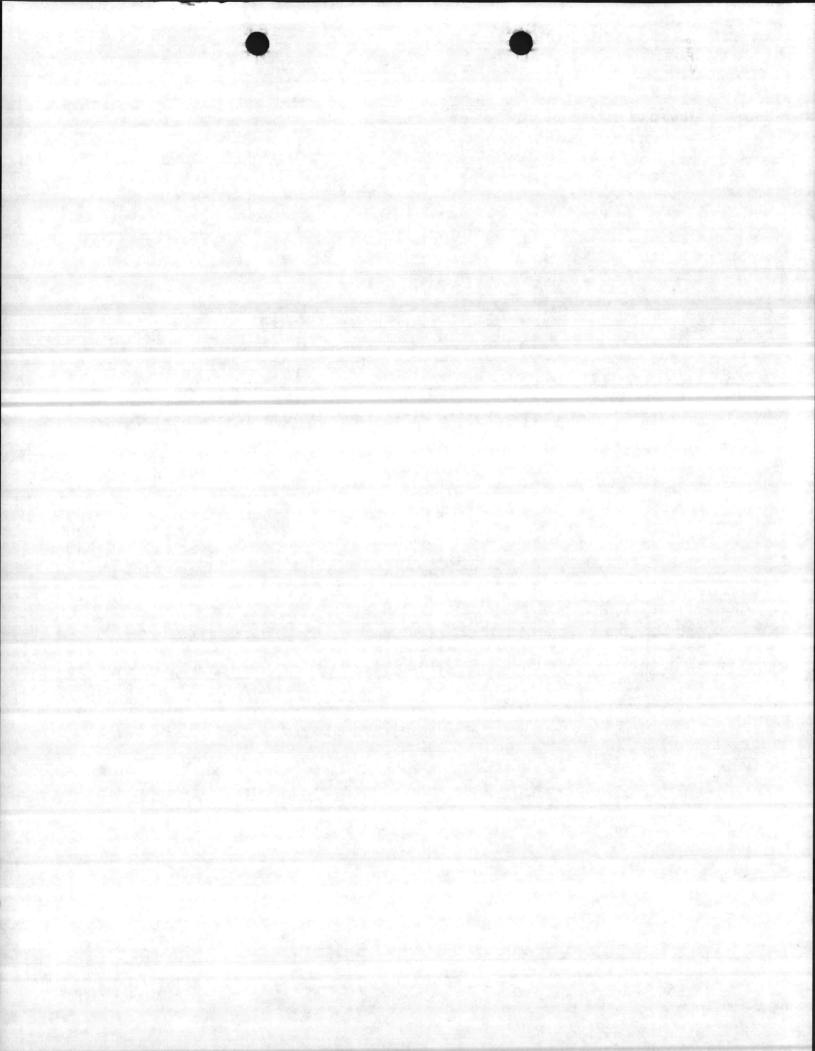
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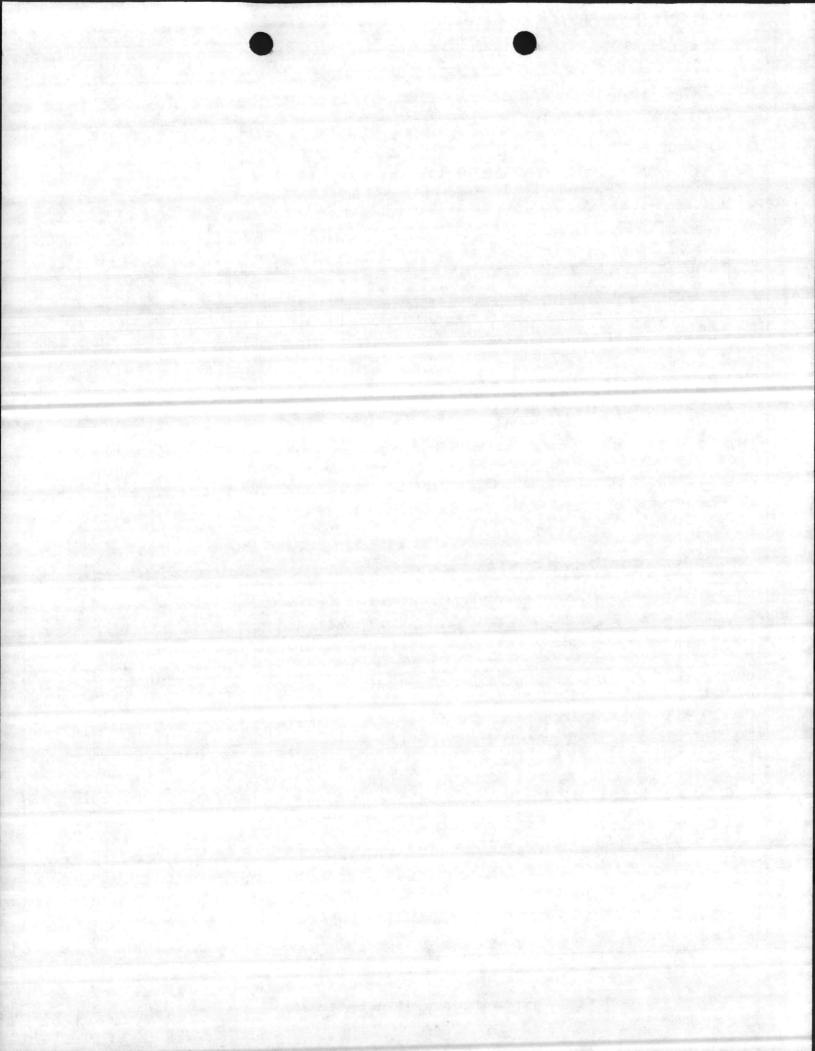
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UHWM 2/LP2

UNIFORM HAZARDOUS	1. Generator's US EPA ID No.		anifest E	2 Page 1 of Info	rmation in t	he shaded areas
WASTE MANIFEST	NC16170022518		ment No.	is no	ot required	y Federal law
Generator's Name DRM	0 BV4 906	1900	LICALI	A. State Manifest D		umber "
TIN. GEENSEGGOES MAN	O BLE GOL SINE COLPS BASE PLESEUME, NC 285			IN 0539	341	
		Yeal		B. State Generator	's ID	
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Transporter 1 Company Name	6. US EPA ID Number		10119	C. State Transporter's Pt	C27:	13
Transporter 2 Company Name	8. US EPA ID Number	0 0 0	page pilling	E. State Transporte	Lat	433711
Designated Escility Name and Site Address	10 US SPAID Numb	111		F. Transporter's Ph G. State Facility's I	DESCRIPTION OF THE PROPERTY OF	
Designated Facility Name and Site Address 5757ECH CORPORATION	/LONESTAR COMENT			G. State Facility 8 1	010	
Limebale Rd				H. Facility's Phone		1 01
GREEN CASTIE, INDI	4NA IINO101016	TO STREET, STR	-		T	606
1. US DOT Description (Including Proper Ship	ping Name, Hazard Class, and ID Number)	12. Con	tainers	13. Total	14. Unit	Waste No.
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Additional Descriptions for Materials Listed A		Ball PHREE	K. Handli	ng Codes for Wastes L	isted Above	)
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GENERATOR'S CERTIFICATION: I hereby declare	the second secon	ratalu daeorihad	shove by prop	or chinning name and are	classified pag	ked marked.
and labeled, and are in all respects in proper condition	n for transport by highway according to applicable into	emational and na	tional governn	ent regulations.	The second second	
If I am a large quantity generator, I certify that I have a p have selected the practicable method of treatment, str small quantity generator, I have made a good faith eff						
small quantity generator, mave made a good failth en	of to fill fill fill fill fill fill fill fil	Emaria.				
Printed/Typed Name	Signature	1	/	A	Month	, Day , Year
HUNTER L.E.	Lauren	-6	Alnes	les	12	0787
7. Transporter 1 Acknowledgement of Receipt						Date
Printed/Typed Name	Signature	. 0	0	X.	Month	Day Year
Eugene Smith  8. Transporter 2 Acknowledgement of Receipt	of Materials	1	ma		10	10171817
Printed/Typed Name	Signature	And a delicate the separate and a	-	-		Date
,					Month	Day Year
9. Discrepancy Indication Space		Maria de la composición dela composición de la composición dela composición dela composición dela composición de la composición dela composición de la composición dela composición de	o si tala	halls driver		
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Facility Owner or Operator: Certification of r		manifest exce	pt as noted	tem 19.		
Printed/Typed Name	Signature	. 1	1	7-/	Month	Day Year
Thomas L No	(nome	a for	1/6	and a	11	1019187



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	UNIFORM HAZARDOUS WASTE MANIFEST  3. Generator's Name and Mailing Address	Manifest ment No	2. Page of	is not law.	require	he shaded areas ed by Federal
	MARINE CORPS BASE URMO		A. State	te Manifest Doo	ument N	umber
	CAMP LEJEUNE N.C. 28542 BLDG 906		B. Stat	e Generator's I	Ō	
	4. Generator's Phone (919 ) 451-5613 AHN: MR EGGERS	2	114419		ALC: UNIVERSE	
1	Transporter 1 Company Name     Company Name     S. US EPA ID Number	er	10112500	e Transporter's		
1	ENVIRON MENTAL TRANSPORTATION SERVICES 10 KD 9 18 1 15 18 16	61015	\$60 FV 3185VI	sporter's Phone	TOO /	745-2002
	7. Transporter 2. Company Name 6. Co Erra to Number	er	THE ENGINEERS	e Transporter's		
	Designated Facility Name and Site Address     10. US EPA ID Number	er	ENTER PRINTED	e Facility's ID		
	SPECIAL WASHE INC.		R said			
11	1713 LEGION Rd.		H. Facil	lity's Phone	222	
1	ATHENS, TN 37303 MINDIO1314151417	12. Cont	6/5	745-	9222	2
1	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	No.	Type	Total Quantity	Unit Wt/Vol	I. Waste No.
GE	* ROI WASTE, OIL, COMBUSTIBLE LIBUID, NAI270		1000000		#	F001, F002
NE	/	0.0.1	7	1.000	1	5 F003
R	b. 1001, 1002, 1001, 1003)	001	1 1	14181010	10	HOOK POUT
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OR						
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1	d.		-			
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1			1+1	1111		
	J. Additional Descriptions for Materials Listed Above		K. Hand	dling Codes for V	Vastes List	ted Above
	Approval 580026					
1	TRUCK CC					
1	DLA 200-88-D0033 D.O.0001 P.O.0577					
	15. Special Handling Instructions and Additional Information SPECIAL WASTE INC WHOTE CONTRACTOR, PLEASE ROUTE ALL CORRESPONDEN	KE A	A Gu	FACILITIES	HATON =	RIZUS
1	P.O. BOX B SAVKUILLE, WI 53080					
1	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully proper shipping name and are classified, packed, marked, and labeled, and are in all respects in propaccording to applicable international and national government regulations.	y and accur oper conditi	rately des	scribed above by ansport by highw	ay	
	If I am a large quantity generator, I certify that I have a program in place to reduce the volume and to economically practicable and that I have selected the practicable method of treatment, storage, or disjustifuture threat to human health and the environment; OR, if I am a small quantity generator, I have mad the best waste management method that is available to me and that I can afford.	sposal curre	ently avai	lable to me which	h minimize	ac the precent and
1	Printed/Typed Name Signature	1	11	A	1	Month Day Year
1	L'AURENCE E. Dunten January	E. K	lune	h		12018187
TR	17.Transporter 1 Acknowledgement of Receipt of Materials  Printed/Typed Name  Signature	1		The second		
NS	Printed/Typed Name Signature	11/11	111		,	Month Day Year
RANSPORT	18.Transporter 2 Acknowledgement of Receipt of Materials	M	MATA	m		1 Yours
RTE	Printed/Typed Name Signature	7.77	•	- 101		Month Day Year
E R						
7	19.Discrepancy Indication Space	16.	1 12.000		-	
FAC-L				Mile Silly		
LIT	20.Facility Owner or Operator: Certification of receipt of hazardous materials covered by this	manifest s	evcest or	e noted in Itom	10	
Y	Printed/Typed Name Signature					Month Day Year
	Mark Sounders Mark &	aun	der	1	1/	121051817

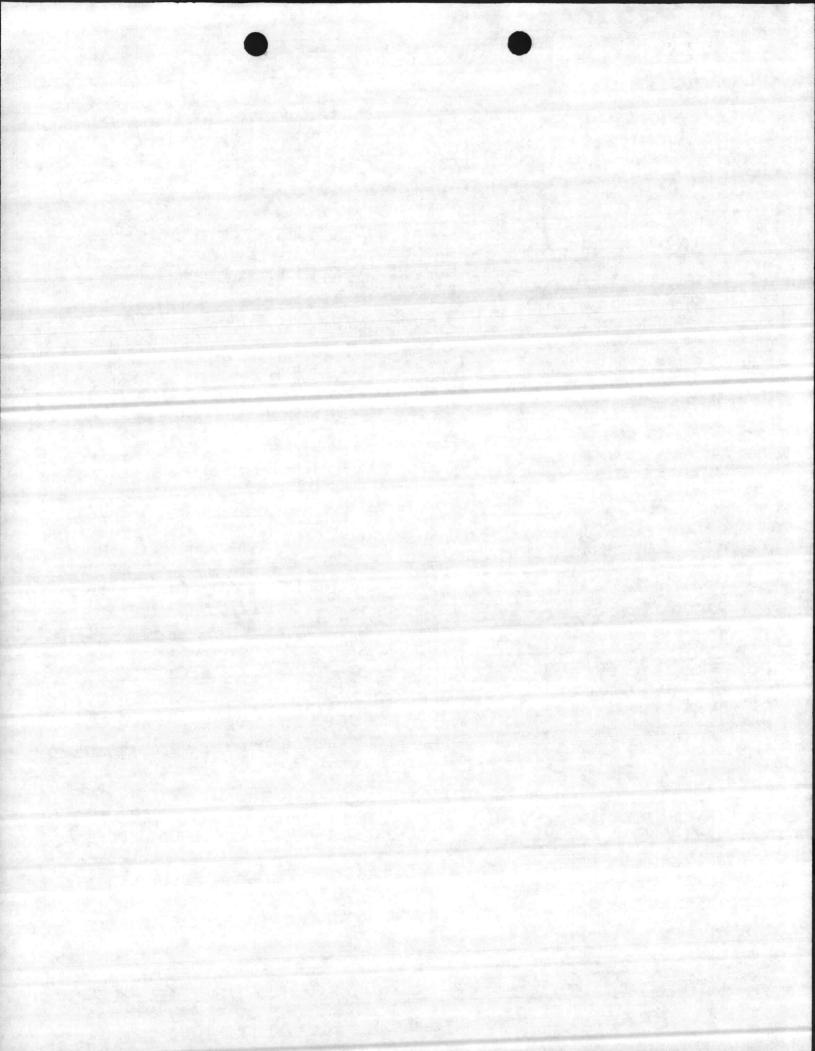


Division of Land Pollution Control - Manif Indiana State Board of Health P.O. Pox 7035 Indianapolis, IN 46207-7035 Please print or type. (Form designed			ı		205-0039	9-30-8
	for use on elite (12-pitch) typewriter)		-	ved OMB No	2000 0404 Exp	ires 7 31 86
WASTE MANIFEST	1. Generator's US EPA ID No.  NIGGI (7100 B) 2156	Doc	lanifest ument No.	2. Page 1 of	Information in the	
3. Generator's Name DRMO '31d MARINE CO CAMP LES	et lotse agent	ESCANS	5	A. State Man IN 05 B. State Gen	3934 erator's ID	umber
5. Transporter 1 Company Name 7. Transporter 2 Company Name	6. US EPA ID Numbe	151516	19119	C. State Tran D. Transport E. State Tran F. Transporte	er's Phone d 5/	1 <del>3</del> 81-4999
9. Designated Facility, Name and Site Address 5/15TEC H CORPORATION LIMEDME Rd	Lonestan 10 US EPA ID Number		210	G. State Faci	lity's ID	06
GREENCASTE, II	V INDIOOK	1000	-		53-20	006
11. US DOT Description (Including Proper Sh.	ipping Name, Hazard Class, and ID Number)	No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
· RAI WASTE 0.2	NOS, COMBUSTIBLE					
Ligoid, NA 1270 (DC	ONFOOL, FOOZ, FOO3 FOOS)	1001	TT	016010	DOG	2001
		bla sak	- 891			
C			1 2 2 2 2 2	111		
d.				111	7	
					(1)	
J. Additional Descriptions for Materials Listed	Above	4.0[Eb15.57]	K. Handlin	g Codes for Wa	stes Listed Above	
TRUCK QQ P.O.  15. Special Handling Instructions and Addition	# 0585 DLA 800-	<b>9</b> 8-0	0033 NC. 1	10,0,00	facility.	\ <del>\</del>
CONTRACTOR FOR HAZ	Arcous SPECIAL WAS Arcous WASTE. PLOASE TO: P.O. Box B, S	AUX VIL	IE W	1 6.11. E 53	3000	
16. GENERATOR'S CERTIFICATION: I hereb	y declare that the contents of this consignment a and are in all respects in proper condition for tr	re fully and ac	ourstely deep	ribad abaya by	proper shipping na ple international ar	ime and are nd national
Section 3002(b) of RCRA, I also certify tha	who has been exempted by statute or regula at I have a program in place to reduce the volumed at the method of treatment, storage, or disposal of	e and toxicity	of wasta gan	proton to the de	aran I have determ	min and the form
Printed/Typed Name	Signature	0	11	1	Market Park Francis	

	Printed/Typed Name HUNTER, L.E.	Signature I II to	Month Day Year
Т	17 Transporter 1 Acknowledgement of Receipt of Materials	of the same of the	Date
HANSPO	Prigted/Typed Name William 3 Hardin  18. Transporter 2 Acknowledgement of Receipt of Materials	Dellan Jahrdea	Month Day Year / 12 = 18 8 7
RTER	Printed/Typed Name	Signature	Month Day Year
	19. Discrepancy Indication Space	the marking and the second second second	

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

RETURNED TO THE GENERATOR BY THE T.S.D.

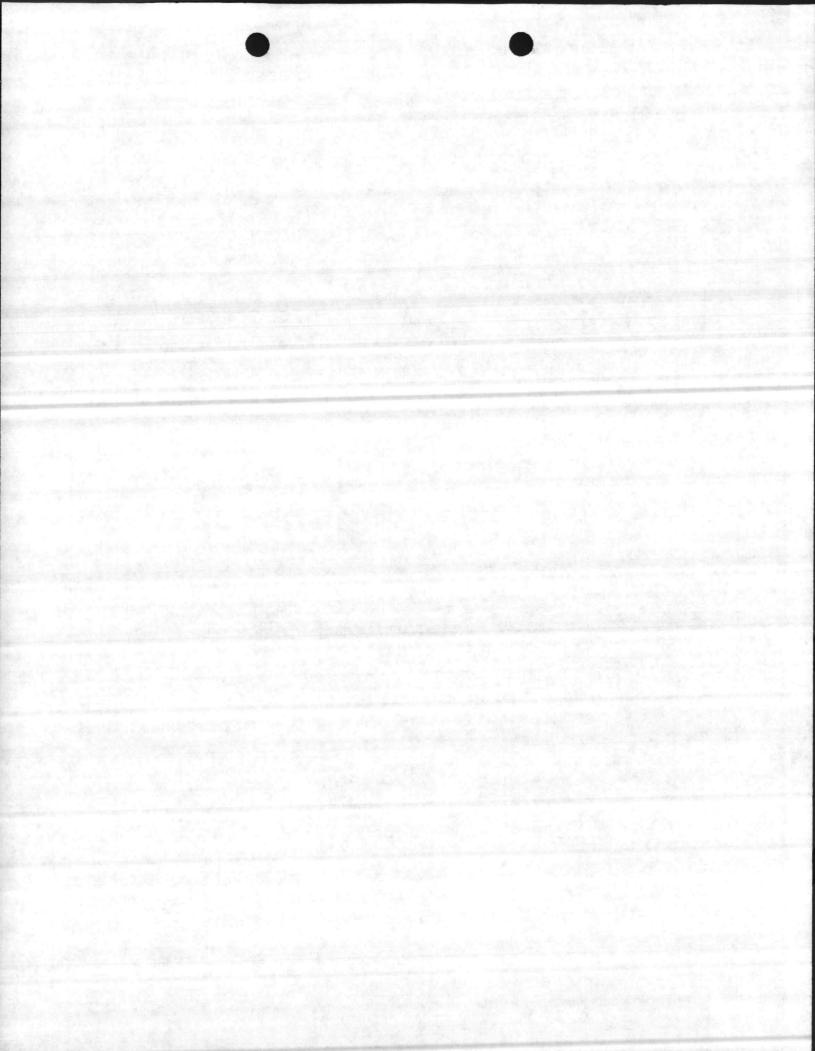


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Division of Land Pollution Control - Man Indiana State Board of Health P.O. Box 7035 DO NOT WRITE IN THIS SPACE

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ndianapolis, IN 46207-7035  Please print or type. (Form designed for use on elite (	12-pitch) typewriter)	F	orm Appro	20 ved OMB No. 200	Della I	9-35 6 pires 731 86
WASTE MANUFEST	17,0,0,2,2,5,B	Docu	anifest ument No.			he shaded areas by Federal law
MARINE CORPS B CAMP LESEUM, N	ATTN. 600	NgE E	66ers	A. State Manifest IN 053 B. State Generate	935	umber
5. Transporter 1 Company Name	6. US EPA ID Number		HARRIE	C. State Transpo	rter's ID	
7. Transporter 2 Company Name	8. US EPA ID Number	15/5/6	19119	D. Transporter's  E. State Transport	NO W	1381-499
0 1 0 1 5 0 1	AE SIN CEMEY	T		F. Transporter's I G. State Facility's		
CREEN DALE, IN	IN 10101016	4119	2113	H. Facility's Phor	53-2	606
11. US DOT Description (Including Proper Shipping Name, Haza		12. Con	tainers	13. Total	14. Unit	I. Waste No.
· RQ I WASTE OIL NOS, FI	lammable	No.	Туре	Quantity	Wt/Vol	
Liguid, NA 1270 (DOOI, FOO	1, FOOZ, FOO3, FOOS)	901	TIT	01600 K	6	2001
		11	T I	1111		
c.			112912			
d.						
J. Additional Descriptions for Materials Listed Above		TO TO FO	K Handlin		Listed Abov	
TRUCK RR P.O. # 0565  15. Special Handling Instructions and Additional Information of Contractor Text hazardous  Contractor Text hazardous  Contractor Text hazardous  16. GENERATOR'S CERTIFICATION: I hereby declare that the classified, packed, marked, and labeled, and are in all respectively.	XX B, SAUKUL contents of this consignment ar	TE IN 1SE × 11E, Que refully and ac	LE 5	3080 cribed above by pro	g An	name and are
Unless I am a small quantity generator who has been ex Section 3002(b) of RCRA, I also certify that I have a program economically practicable and I have selected the method of tr human health and the environment.	in place to reduce the volume	and toxicity	of waste ge	nerated to the degre	e i have dete	rmined to be
Printed/Typed Name    Hunten L. E.     17. Transporter 1 Acknowledgement of Receipt of Materials	Signature Lauras nu	· fe.	Luc	tu	Mont.	Day Ye 8   Date
Printed/Typed Name  JEFF JONES	Signature	900	120		Mont	Day Ye
18. Transporter 2 Acknowledgement of Receipt of Materials  Printed/Typed Name	Signature				Mont	Date Day Ye
19. Discrepancy Indication Space 5 DEC 100	) 3e	Marian Alaca da		Car China		
20. Facility Owner or Operator: Certification of receipt of hazarde	ous materials covered by this r	manifest exce	ept as noted	Item 19.	/ Mari	h Day V-
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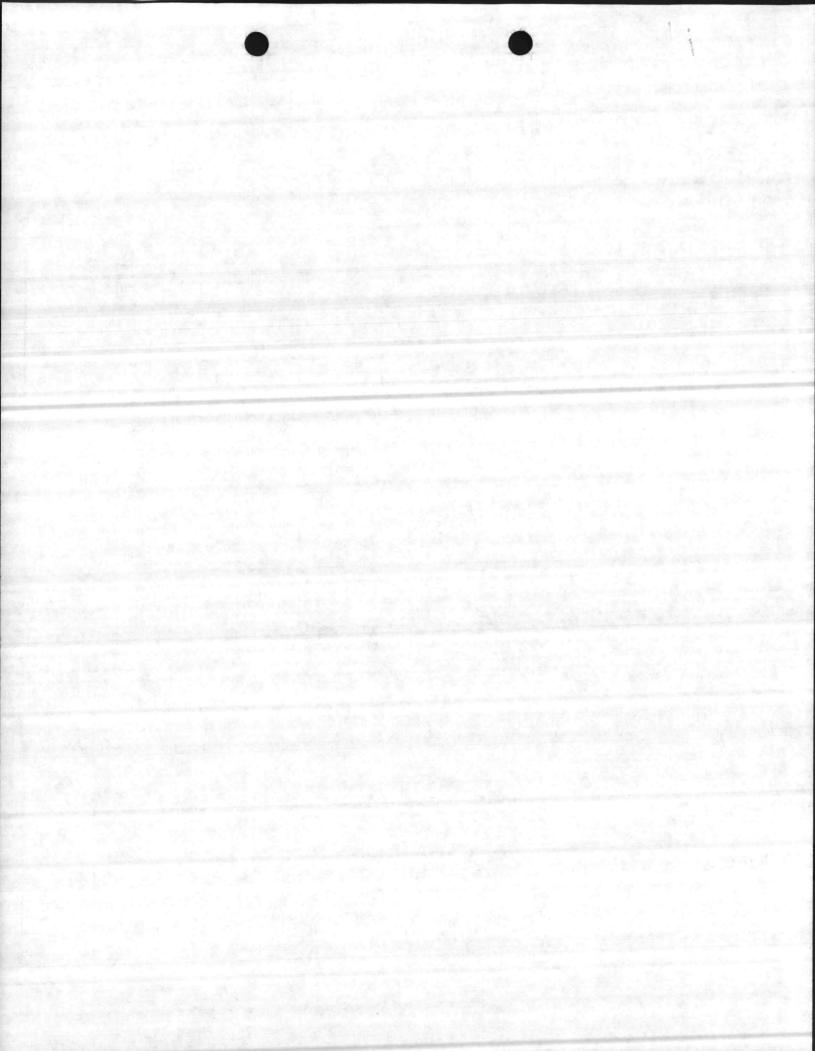


Division of Land Pollution Control - Manife Indiana State Board of Health

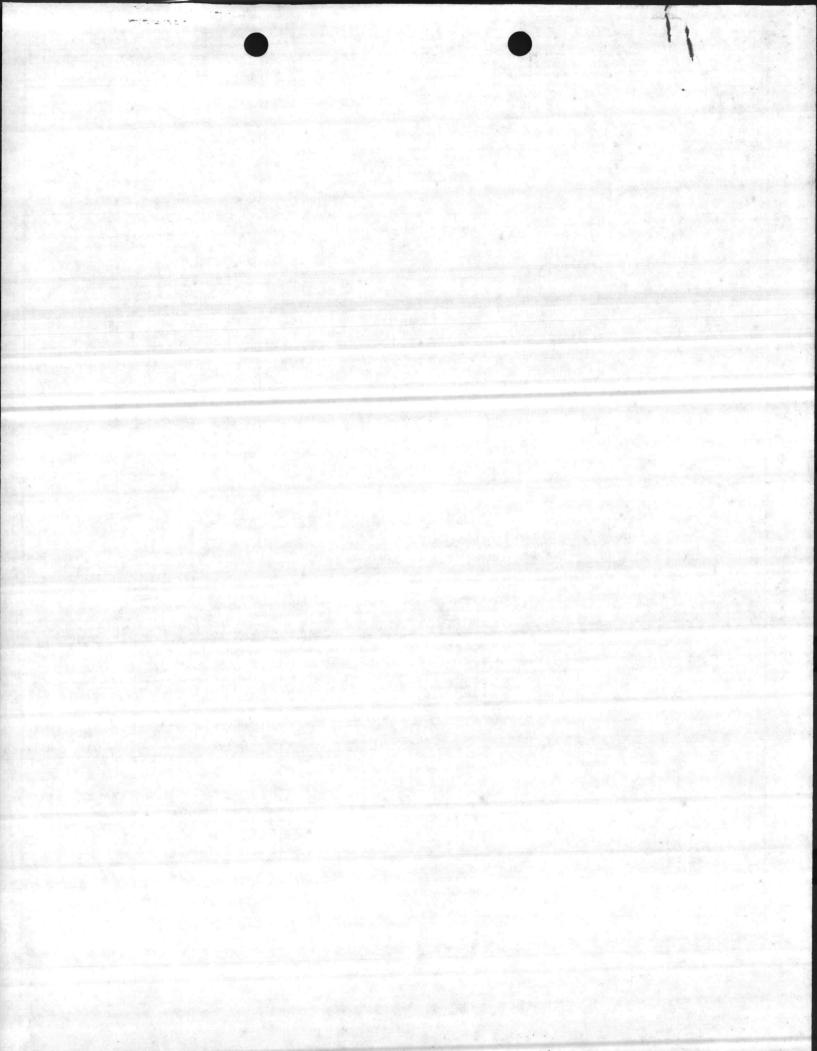
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P.O. Box 7035 Indianapolis, IN 46207-7035

UNIFORM HAZARDOUS 1. G	enerator's US EPA ID No.		ment No.	130 100		he shaded areas by Federal law
Generator's Name DRMO Blog	1611701012121511 906 ATTN. 6600 15 NESE 28542	310 DIO1	1134	A. State Manifest I	Document N	
CAMP LO SEUNE Generator's Phone (419) 451-5	613 PASE 28542		1334	IN 0539		
Transporter 1 Company Name  50 INC  Transporter 2 Company Name	6. US EPA ID Number 18 18 18 18 18 18 18 18 18 18 18 18 18	75518	0119	C. State Transport D. Transporter's P E. State Transport	hone (o/5	/381-490
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REEM CASTIE , IN	INDIO	041191	21/2	H. Facility's Phone 317- (65:		06
US DOT Description (Including Proper Shipping Na	Parallel Street	12. Cont No.	ainers Type	13. Total Quantity	14. Unit Wt/Vol	I, Waste No.
Rai WASTE OIL NOS,	Combustible  Ol, Fool, Fooz, Fooz, Fooz, Foo	SCO T	TT	060100	6	D 000
		211214				Bankara a
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Special Handling Instructions and Additional Information Hand tex fee hazandous Correspondence to:	P.O. BOX B, SAL	Kuille	1877 18 41 WI.	This Faci 18 ling 5300 DL	1. 1. 2. 2. A 200	/ D-88-1
NUK pp P. 0.# 056 5. Special Handling Instructions and Additional Inform	the contents of this consignment are fully and r transport by highway according to applicab am in place to reduce the volume and toxicity a conditional content and toxicity and the conditional currently available to me which	accurately describe international and of waste generated	ed above by p	This TAC.	A 200	packed, marked, icticable and that I
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	UNIFORM HAZARDOUS 1. Generator WASTE MANIFEST WIC 6 /	S US EPA 10 NO. 7000225781010	Manifest Document No.	2. Pa			the shaded areas red by Federal
3	Generator's Name and Mailing Address DRMO- (	PAMP LEJEUNE		A. Sta	ate Manifest Docu	ment	Number
	Bldg 90 CAMP C	eseune, NC 285	42	B. Sta	ete Generator's IC	)	
5	Generator's Phone (919) 451-5613  Transporter 1 Company Name	6. US EPA ID N	lumber	C. Ste	nte Transporter's	ID	Marie as
	OSCO INC	TN1010189155	180119	1015 to 915000	insporter's Phone		381-4999
7	Transporter 2 Company Name	8. US EPA ID N	umber		ite Transporter's		
19	Designated Facility Name and Site Address	10. US EPA ID N	I I I I	THE DECISION	insporter's Phone		
	Special WASTE INC	io.	diffuel	G. Ote	ite Facility's ID		
-	1713 LEGION RD			H. Fac	cility's Phone		
	ATHOUS TN 37303	TND1013141514	17/1/4/		(615) 745	5 - 9	7222
1	US DOT Description (Including Proper Shipping Name, Hazard	d Class, and ID Number)	12. Cont	Type	13. Total Quantity	14. Unit Wt/Vo	I. Waste No.
a	"RQ" I WASTE OIL COMBUSTIBLE	E LIQUID	Frankli Britanista ete	Greek	100 (100 (100 (100 (100 (100 (100 (100		F001, F002
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	A. 5800% TANK 891 /	ST 62					
	5. Special Handling Instructions and Additional Information 6. GENERATOR'S CERTIFICATION: I hereby declare that the	DIA200-88	B D O O S	33 / Tately d	D. 0 ± 000)		
	proper shipping name and are classified, packed, marked, and according to applicable international and national government If I am a large quantity generator, I certify that I have a progra economically practicable and that I have selected the practical future threat to human health and the environment; OR, if I am	d labeled, and are in all respects it regulations.  In in place to reduce the volume ole method of treatment, storage,	in proper conditi and toxicity of w or disposal curre	on for t	ransport by highwanerated to the degralable to me which	ree I hav	zes the present and
-	the best waste management method that is available to me a Printed/Typed Name	nd that I can afford.	1	11	1		Month Day Year
	Hunter L.E.	Danua	e &	Vie	tu		1/21/161812
	17.Transporter 1 Acknowledgement of Receipt of Materials	and the second s	manufation and a		THE OWNER ASSESSMENT OF THE PROPERTY.	CONSTRUCTOR THEOREM	I F. IZ IS B IZ
-	Printed Typed Name	Signature	711		11		Month Day Year
	18.Transporter 2 Acknowledgement of Receipt of Materials	Sez	Hells	ed	May		N511812
	Printed/Typed Name	Signature		•	1		Month Day Year
-	19.Discrepancy Indication Space			WEST-SPC-NUMBER	COMMUNICATION OF THE PERSON		
	20.Facility Owner or Operator: Certification of receipt of he		this manifest	except	as noted in Item	19.	
	Printed/Typed Name	Signature	0	0	1 40 .		Month Day Year
MAL MORALIN	Mark Sevenses	mark	Saus	sall	Salara Maria	HOLE BARROOM	1/2///3/



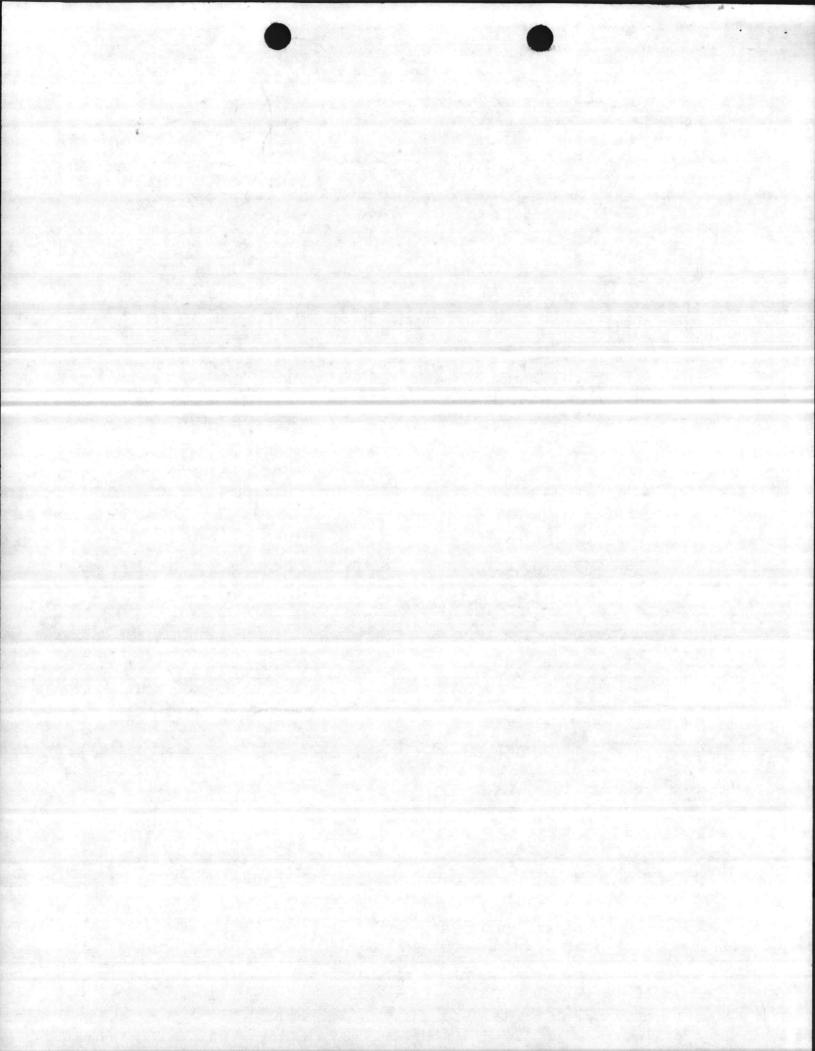
Division of Land Pollution Control - Namest Indiana State Board of Health P.O. Box 7035 Indianapolis, IN 46207-7035

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2050-0039 9-30-88

UNIFORM HAZARDOUS	Generator's US EPA ID No.	NAD DOM	lanifest	2 Page 1 of Infe		
WASTE MANIFEST	46117010025	Doci	urnent No.			the shaded area by Federal law
Generator's Name  DRM  MAR  MAR	the state of the s			A State Menifest IN 053	943	umber
Generator's Phone (919) 451-5	613 ATTN: 68	Andrew Colored Brown B.	66 eves	B. State Generato	/s ID	
Transporter 1 Company Name  500 INC .  Transporter 2 Company Name	8. US EPA ID Number	15518	1919	C. State Transporter's P. E. State Transport	hone 15	1381-49
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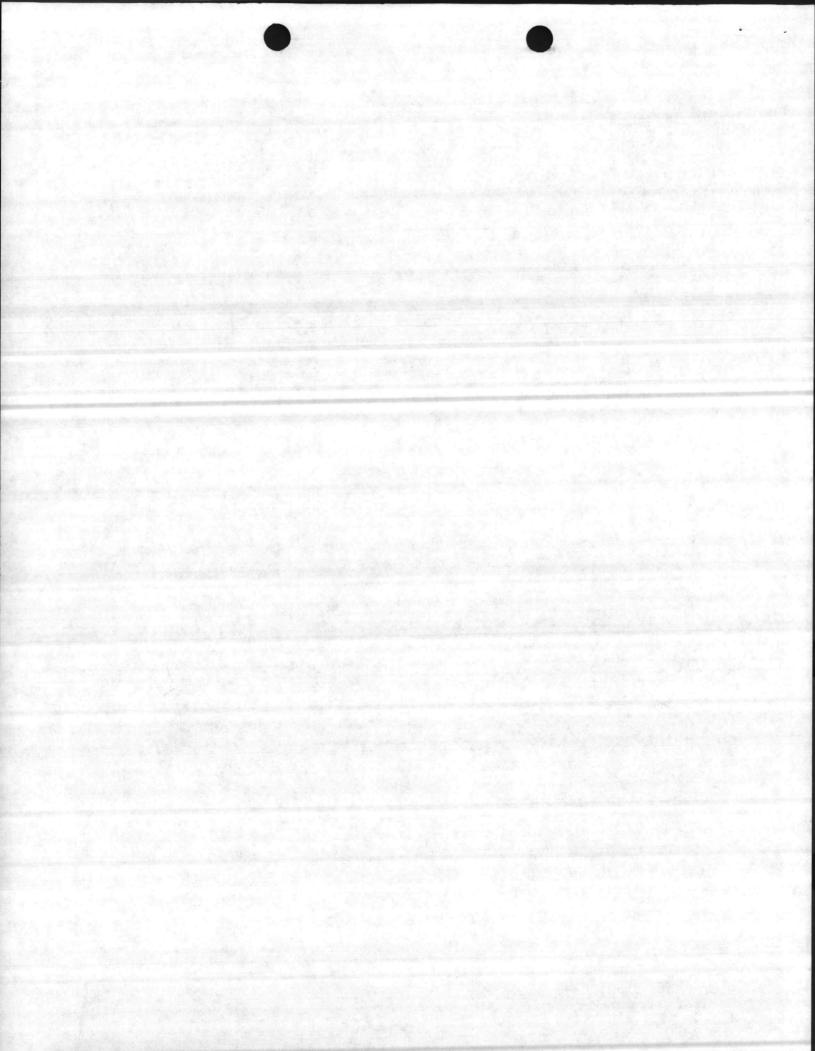
Division of Land Pollution Control - Ma Indiana State Board of Health P.O. Box 7035

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UNIFORM HAZARDOUS	Generator's US EPA ID No.		pifest	2. Page 1 of Infor	mation in the	ne shaded areas
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RETURNED TO THE GENERATOR BY THE T.S.D.



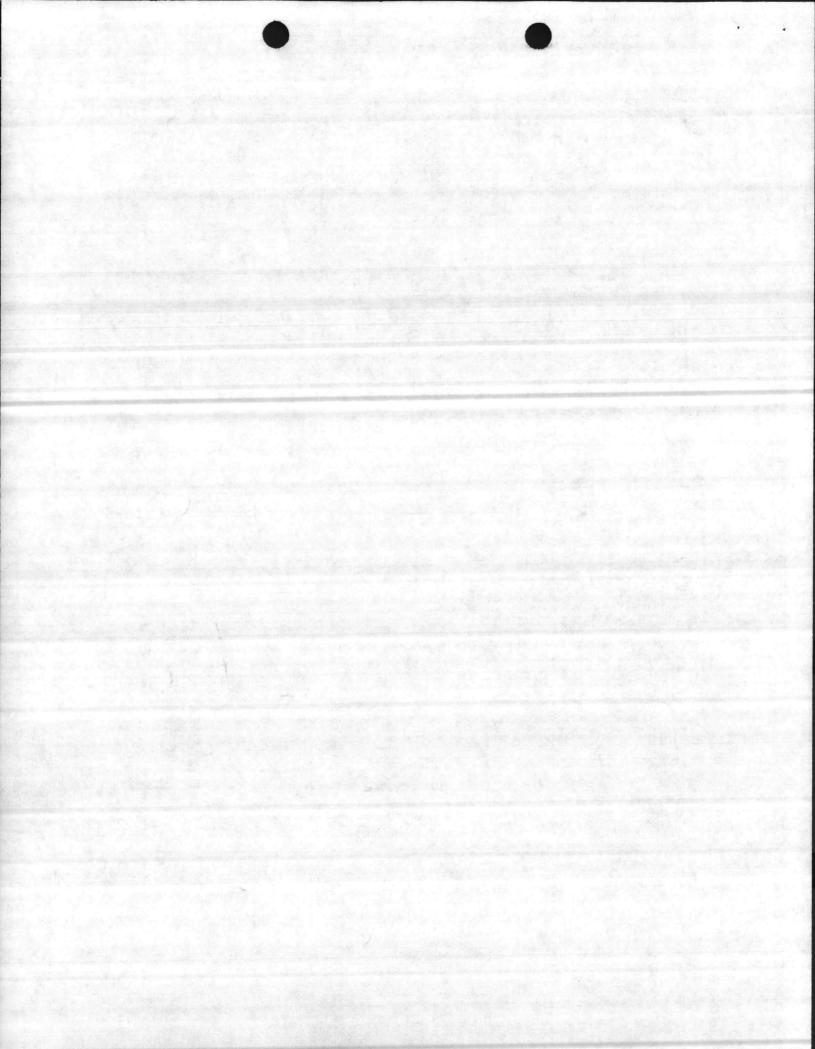


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EPA Form 8700-22A (70-11-06). 9-86

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RETURNED TO THE GENERATOR BY THE T.S.D.



### Division of Land Pollution Control - M Indiana State Board of Health P.O. Box 7035

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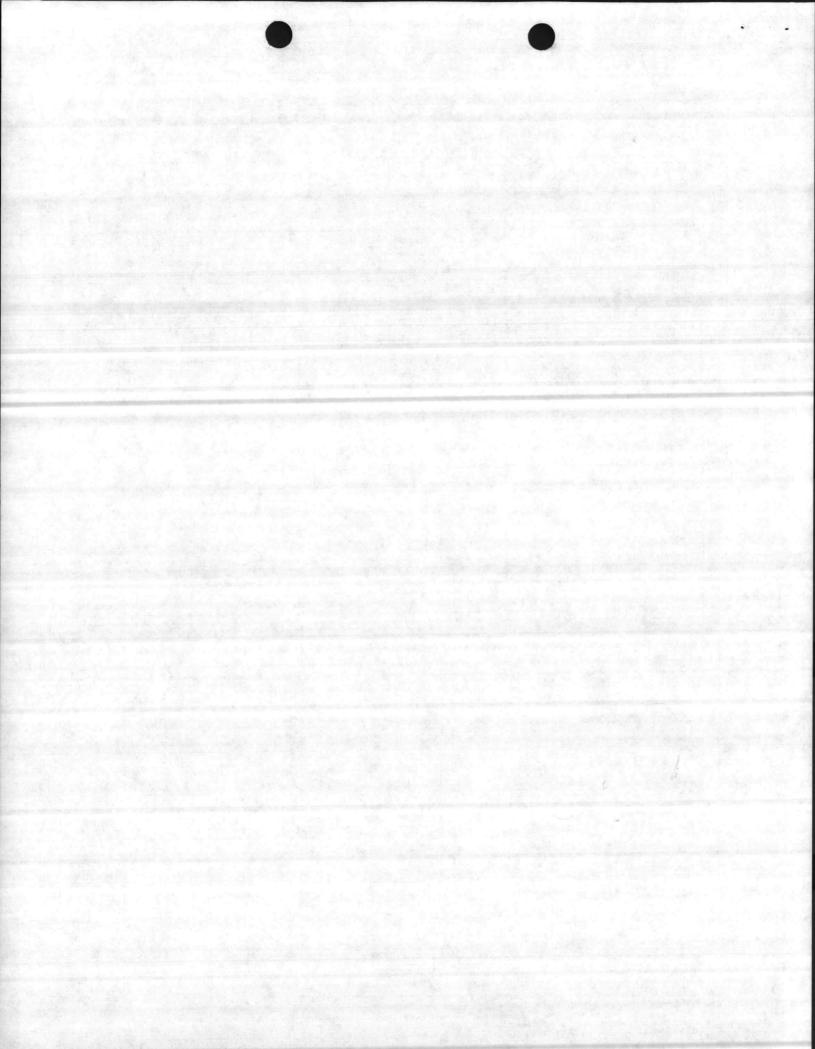
9-30-80

Indianapolis, IN 46207-7035

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

2030 -0039 9-30 Form Approved OMB No: 2000-0404 Expires 7-84-86

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-	5. Transporter 1 Company Name  COCO INC 7. Transporter 2 Company Name	- 5613	6. US EPA 10 Number 7 W 10 0 8 9 6. US EPA 10 Number	চাহাপ্ত	1011 19	C. State Transporter's Pr	ione Col 5	13-489
-	9. Designated Facility Name and Site Address SYSTECH Corporation L. mcDAle Rd	/LONE STAR	10 US EPA ID Numbe CSM SnT	1 1 1		F Transporter's Ph G State Facility's I		
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1	6. GENERATOR'S CERTIFICATION: I hereby declare it and labeled, and are in all respects in proper condition if I am a large quantity generator, I certify that I have a prhave selected the practicable method of treatment, store small quantity generator, I have made a good faith effects.	ogram in place to reduce	y according to applicable inter the volume and toxicity of wast	e generated to the	ne degree I have	e determined to be economicat to human health and the	nically practica	ble and that I
	Printed/Typed Name  HUNTER L.E.  17. Transporter 1 Acknowledgement of Receipt of	of Materials	Signature	fa.	Nous	to	Month 1 2	Day Year 8 7 Date
	Printed/Typed Name  Eugene Smith  18. Transporter 2 Acknowledgement of Receipt of	of Materials	Signettire	8	ma	8.	Month 112	Day Year
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	19. Discrepancy Indication Space		(V-0.8			e and Facilities of the control of the copies.		
-	20. Facility Owner or Operator: Certification of re	eceipt of hazardous r	naterials covered by this	nanifest exce	pt as noted i	tem 19.	10.1	A 2 × 1.90
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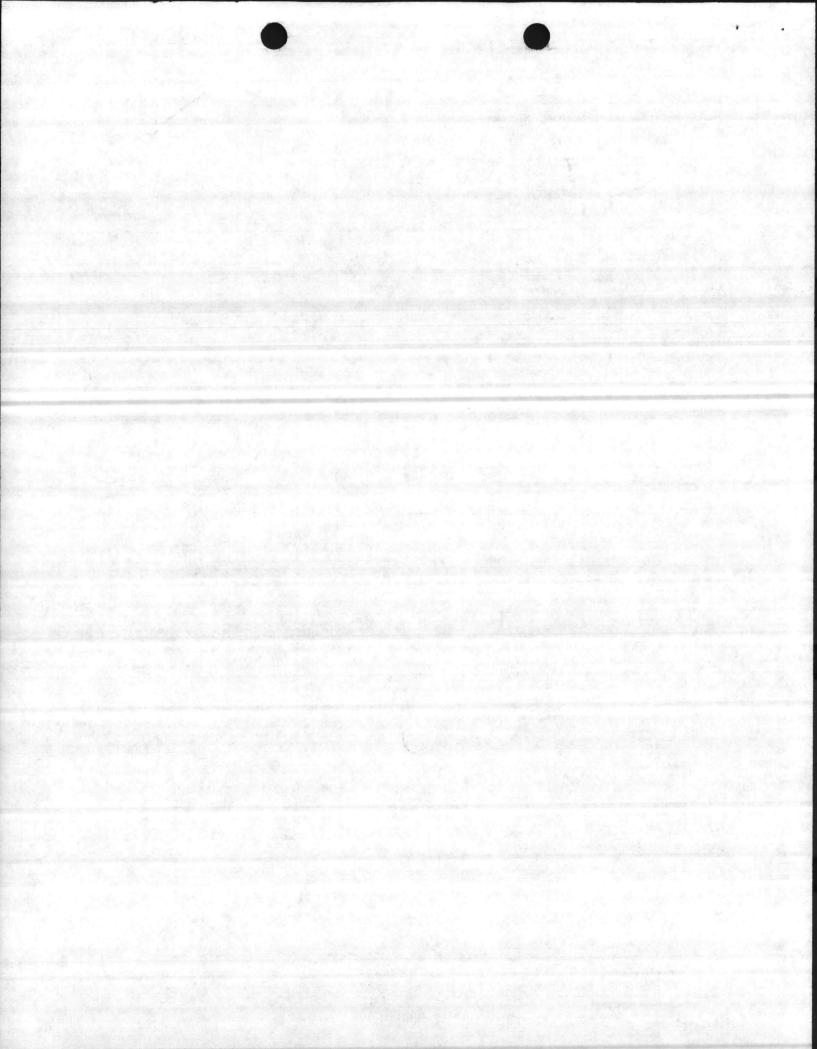




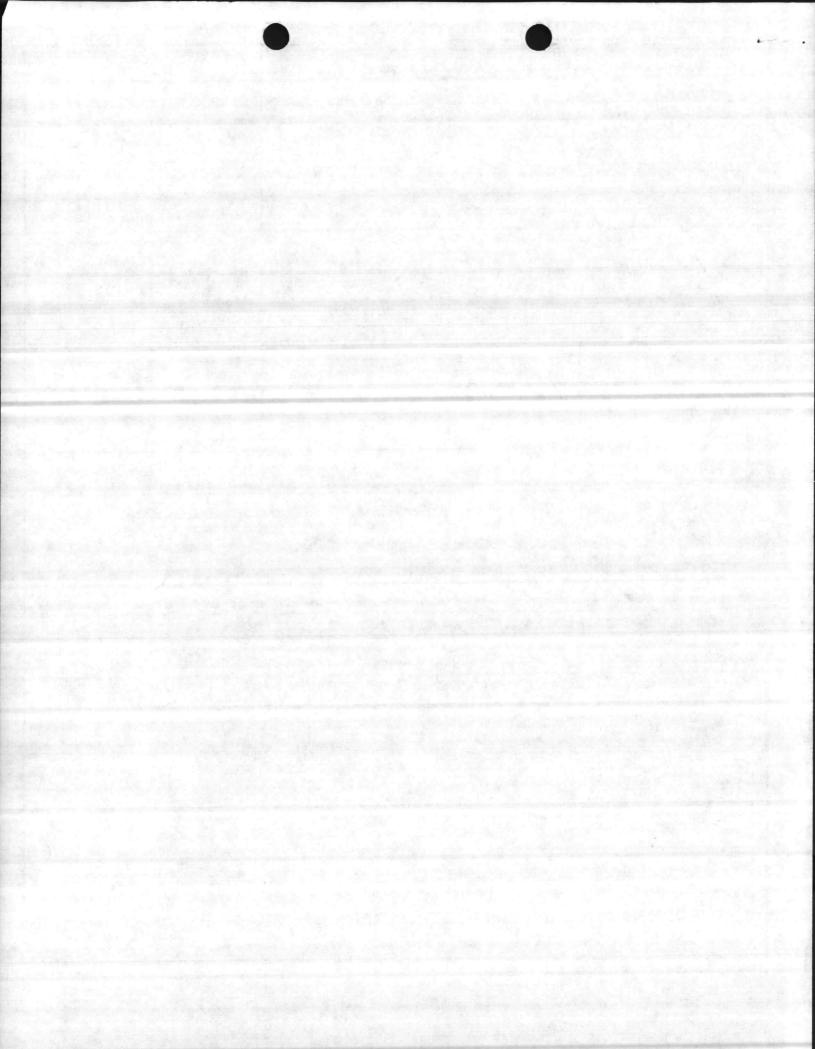
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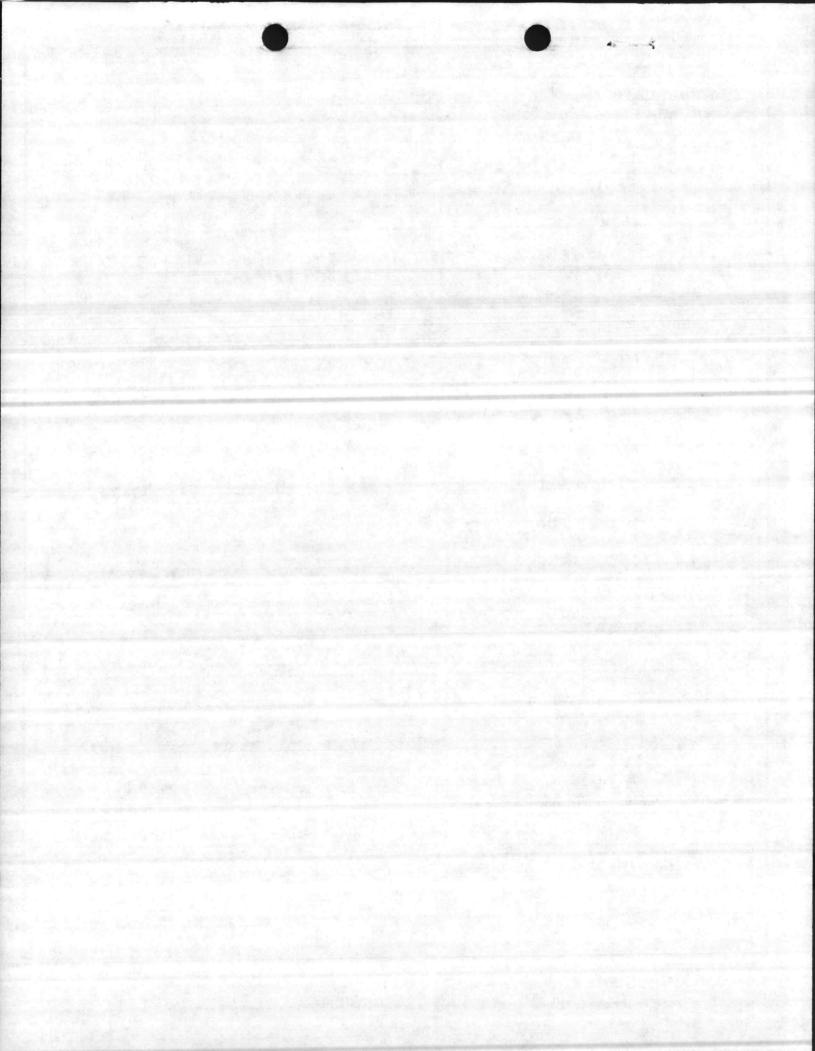
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3. Generator's Name DRMC MARIN CAMP	Bldg 9010	777N'. GEN £ 66	25	A State Manifest D IN 0539 E State Generator	ocument N	umber
5. Transporter 1 Company Name COCO TWC 7. Transporter 2 Company Name 9. Designated Facility Name and Site Address S13 TCC TWC	6. US EPA ID. 	18 95 58 Number	01/19	C. Shie Transporte  D. Transporter's Pf  E. State Transporte  E. Transporter's Ph  G. State Facility's I	one Lay S	/381-49
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TRUCK MM P.O.  5. Special Handling Instructions and Additional  FOR HAZMEDOWS WASTE,  6. Iling To: P.O. Box	10585 Information SPECIAL OF PIGASE ROUTE					
16. GENERATOR'S CERTIFICATION: I hereby deck and labeled, and are in all respects in proper con it I am a large quantity generator, I certify that I have have selected the practicable method of treatment small quantity generator, I have made a good faitt	are that the contents of this consignment are is dition for transport by highway according to a program in place to reduce the volume and content are income content as with the transfer as a content are income.	fully and accurately descrit applicable international an toxicity of waste generated to which minimizes the pre-	ped above by ped national gov	proper shipping name and ernment regulations.  I have determined to be ecc	are classified	packed, marked,
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3. Generator's Name and Mailing Address	DRMO			Manifest Doc		Number
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ENVIRON MENTAL TRANSPORTATION SERVICES			D. Trans	Sporter's Phone		1745-2002
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SPECIAL WASTE INC.				ty's Phone		
	MND034547	12. Cont	0/5	/745-9	CONTRACTOR CO.	2
11. US DOT Description (Including Proper Shipping Name, Hazard Cl		No.	Type	13. Total Quantity	14. Unit Wt/Vol	Vaste No.
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If I am a large quantity generator, I certify that I have a program in economically practicable and that I have selected the practicable in future threat to human health and the environment; OR, if I am a sthe best waste management method that is available to me and the service of the servi	nethod of treatment, storage, or dis small quantity generator, I have ma	sposal curre	antly avail	able to me which	minimi	ses the present and
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20.Facility Owner or Operator: Certification of receipt of hazard	dous materials covered by this	manifest e	except as	noted in Item	19.	
Printed/Typed Name Mark Samders	Signature 8	aun.	lers			Month Day Year 1 2 0 5 8 7



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4. Generator's Phone (9/9 ) 45/-56/13 5. Transporter 1 Company Name 6.	US EPA ID Numbe	DF.	C. Ster	te Transporter's	ID
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7. Transporter 2 Company Name/	US EPA ID Numbe	*	1000	te Transporter's hisporter's Phone	iD
9. Designated Facility Name and Site Address  Special Waste Line	D. US EPA ID Numbe	er.	BERNES LA	la Facility's ID	
Athen, TN 37303 17	[NID01314151417]	NAMES OF THE PARTY	GI.	stry's Phone	1222
11. US DOT Description (Including Proper Shipping Name, Hazard Class	s, and ID Number)	12. Conta	Type	13. Total Quantity	14. Unit Wt/Vot Waste No.
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according to applicable international and national government regu	lations.		ARTES SE		
If I am a large quantity generator, I certify that I have a program in ple economically practicable and that I have selected the practicable met future threat to human health and the environment; OR, if I am a sm the best waste management method that is available to me and that	thod of treatment, storage, or dis all quantity generator, I have ma	sposal curre	ntly ava	ilable to me which	minimizes the present and
Hunter Laurence E	Signature	1	11	+	Month Day Year
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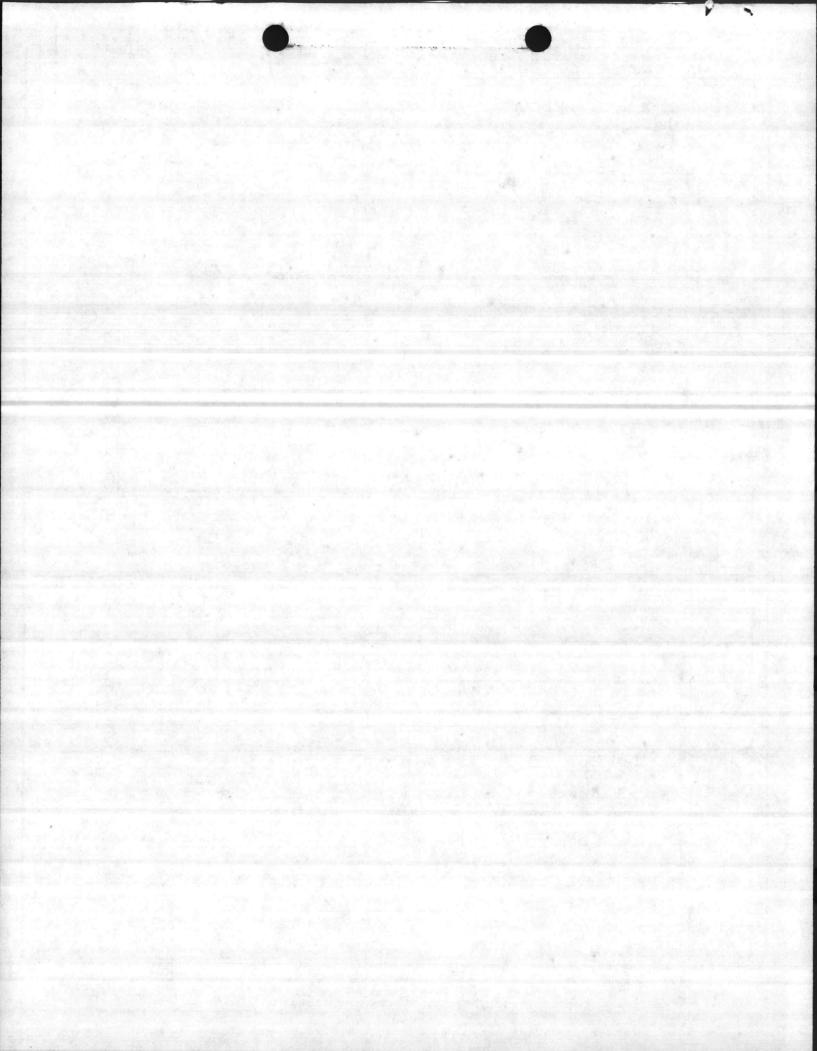


19. Discrepancy Indication Space

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

Brigted/Typed Name Sounders Signature

Month Day Year



AMENDME SOLICITAT	AMENDME SOLICITATION/MODIFICATION OF CONTRACT			
2. AMENDMENT/MODIFICATION NO. P00002	3. EFFECTIVE DATE See Blk 16C	4. REQUISITION/PUR		ROJECT NO. (If applicable)
Defense Reutilization & DRMS-P, Bldg. 210/4, 21 Memphis, TN 38114-5052 J. Dempsey/(901)775-676	163 Airways Blvd		(If other than Item 6)	CODE
8. NAME AND ADDRESS OF CONTRACTOR		7.IF Code)	(/) 9A. AMENDMENT	OF SOLICITATION NO.
Special Waste, Inc. 902 S. Main St. Saukville, WI 53080-05	501		NO.	DN OF CONTRACT/ORDER 8-0033-0001
			10B. DATED (SEE )	
CODE	FACILITY CODE			Oct 87
11. THIS	ITEM ONLY APPLIES TO	AMENDMENTS OF S		
	SIGNATED FOR THE RECEIP ue of this amendment you desir ference to the solicitation and to ATA (If required)  0 2527 S20-114  1 APPLIES ONLY TO MOD LES THE CONTRACT/ORD DRSUANT TO: (Specify author T/ORDER IS MODIFIED TO R N ITEM 14, PURSUANT TO TO IS ENTERED INTO PURSUAN IS ENTERED INTO PURSUAN	TOF OFFERS PRIOR TO change an offer alrest to change an offer alrest to change an offer alrest to change and is reduced by the changes of the change of the chang	TO THE HOUR AND DATE ady submitted, such change ceived prior to the opening I	SPECIFIED MAY RESULT may be made by telegram on nour and date specified.
E.IMPORTANT: Contractor is not,  14. DESCRIPTION OF AMENDMENT/MODIFIC  The above numbered or  1. Page 2, modificat 4720AAAC and CLIN  2. Price remains \$17	der is changed a ion No. P00001, 4720AAAD.	ection headings, including AS follows:		t matter where feasible.)
3. No other changes a		in Item 90 or 100 as he	eretofore changed, remains u	unchanged and in full force
and effect.  15A. NAME AND TITLE OF SIGNER (Type or		16A. NAME AND TITE	E OF CONTRACTING OF EL S. DEMPSEY tracting offic	FICER (Type or print)
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES		16C. DATE SIGNED
(Signature of person authorized to sig	(n)	BY WWW (Signature	of Contracting Officer	sey & War

NSN 7540-01-152-8070 PREVIOUS EDITION UNUSABLE

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STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243

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