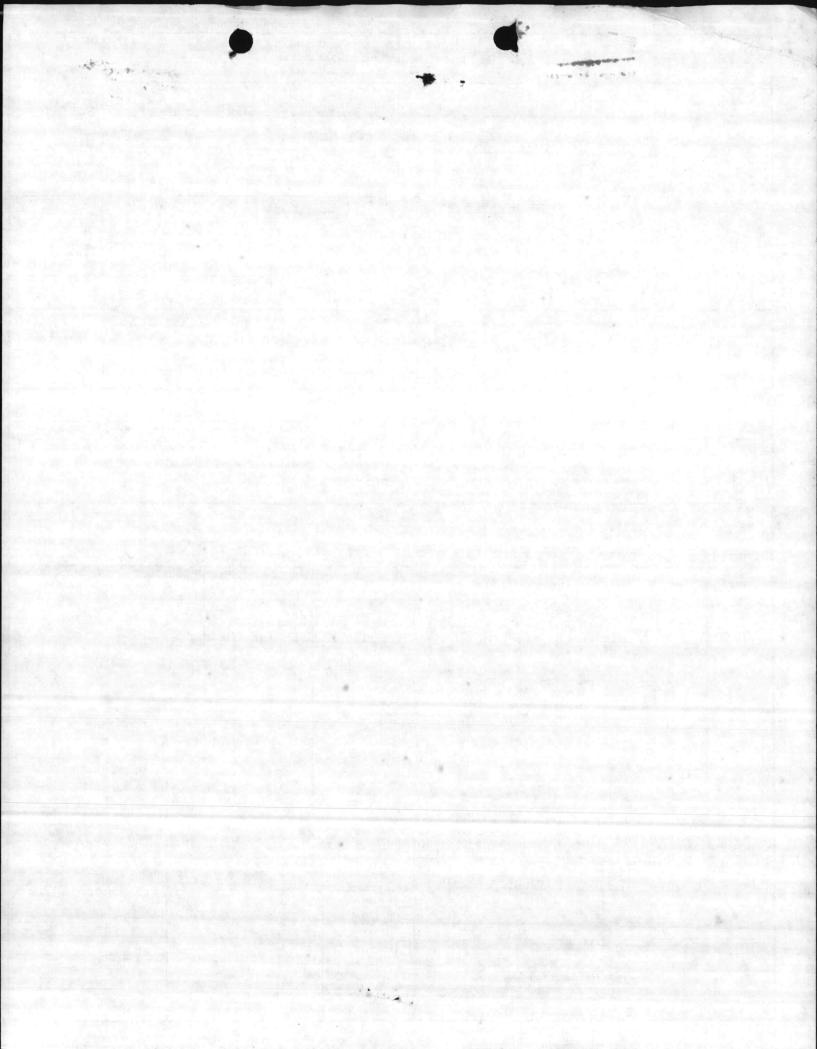
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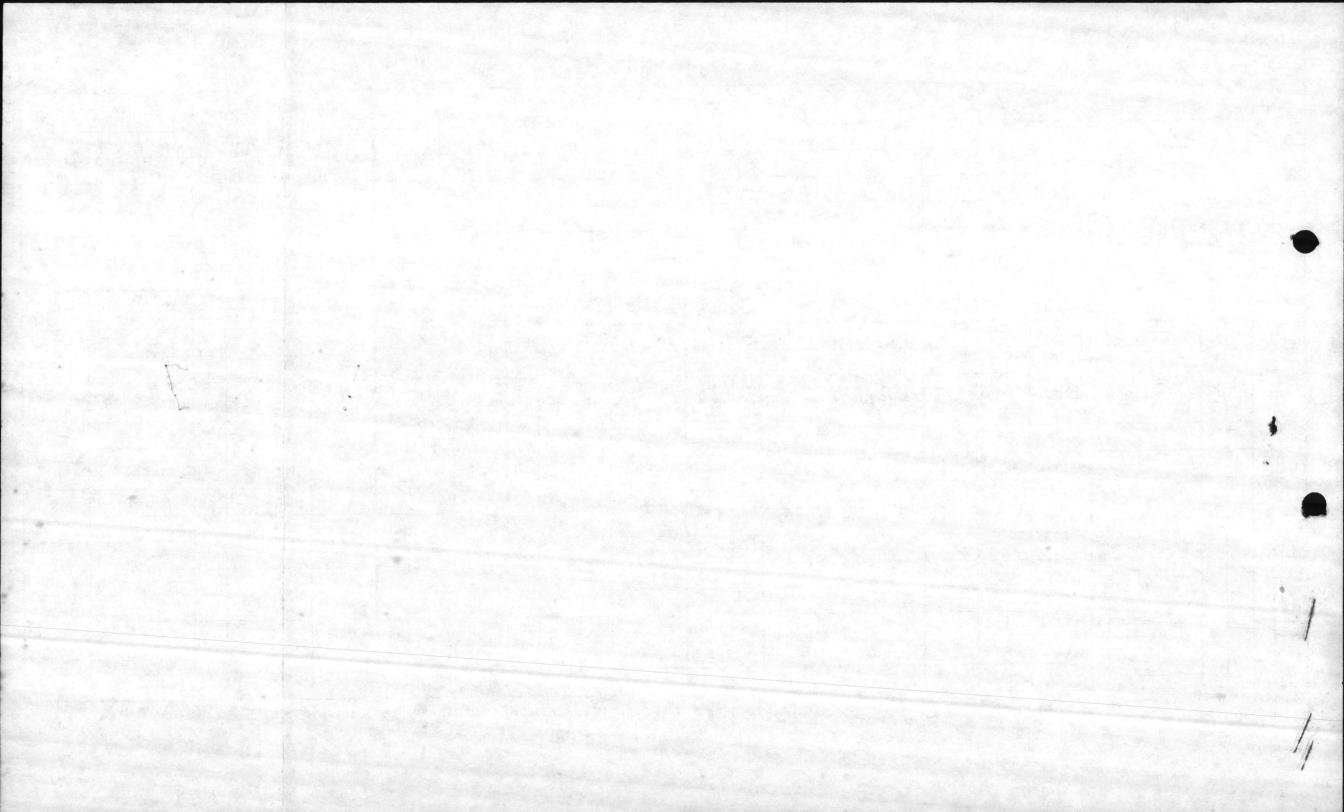


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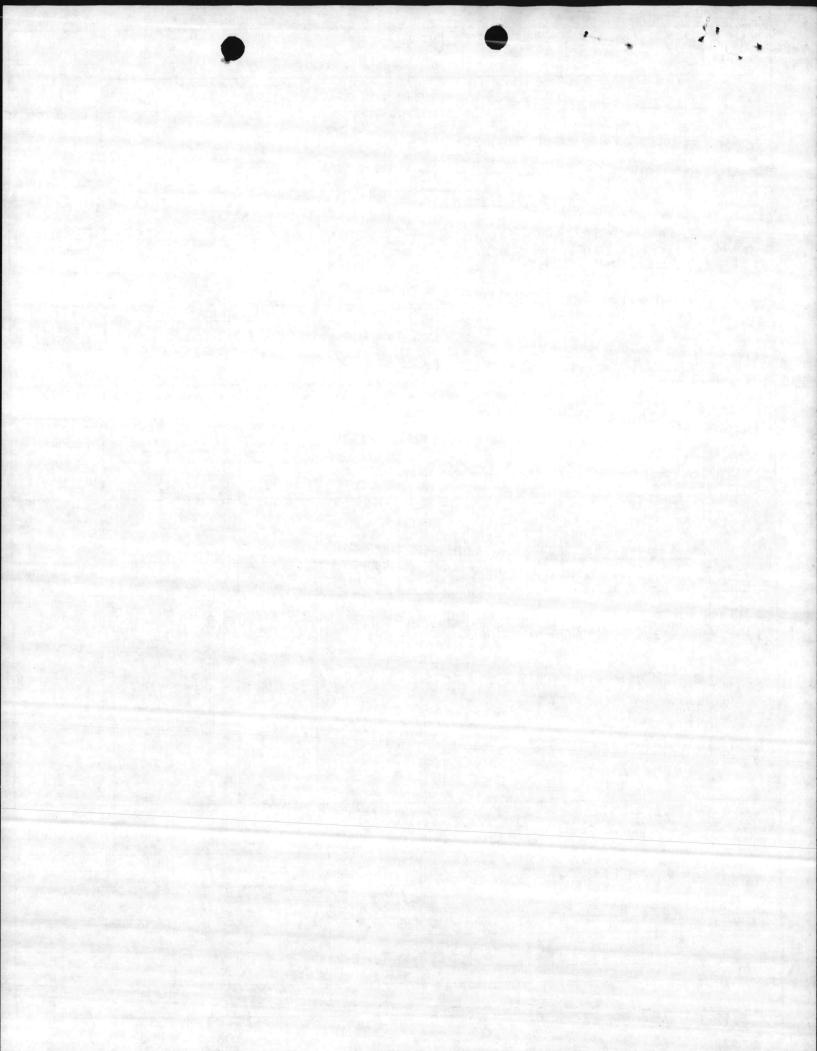
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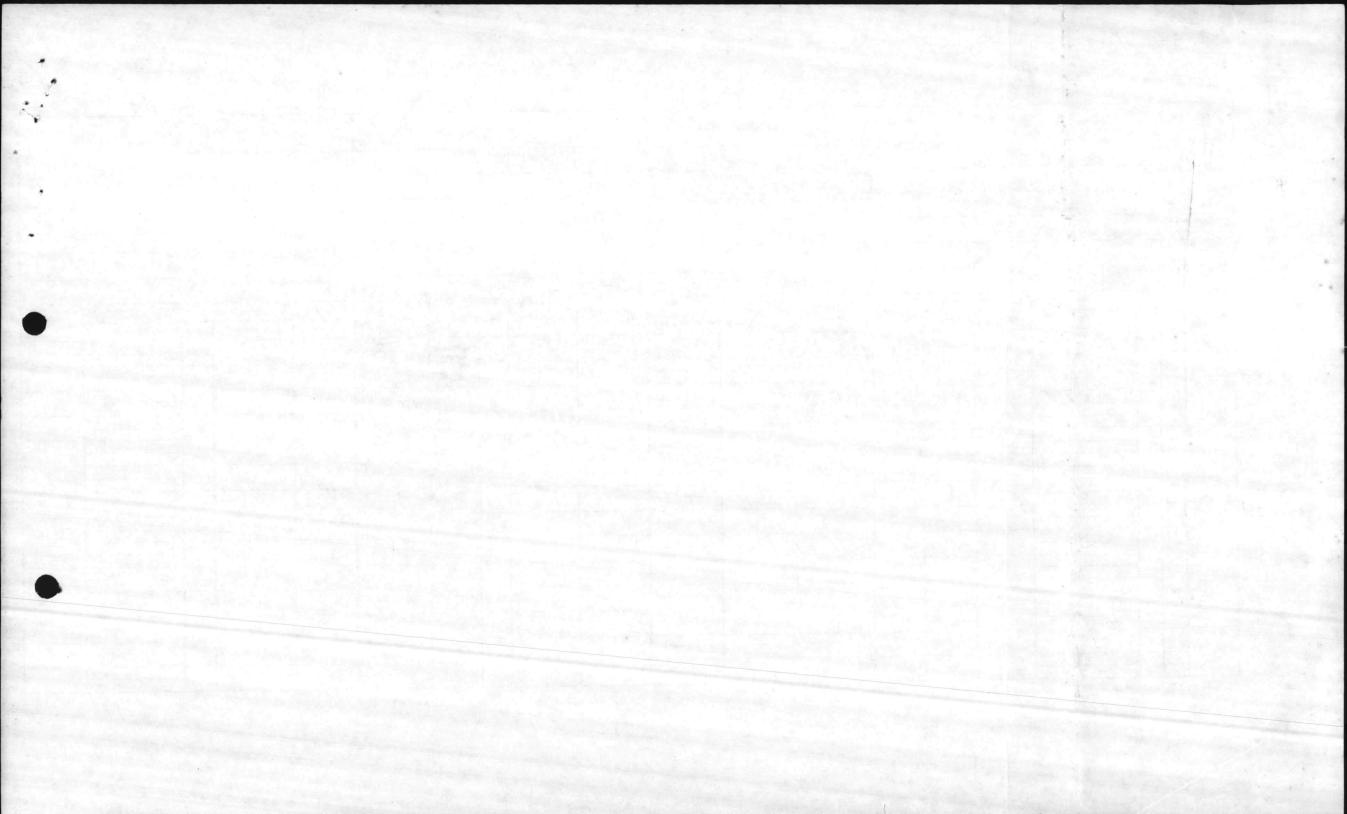
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(SEE REVERSE FOR ADDITIONAL REMARKS IF APPLICABLE)

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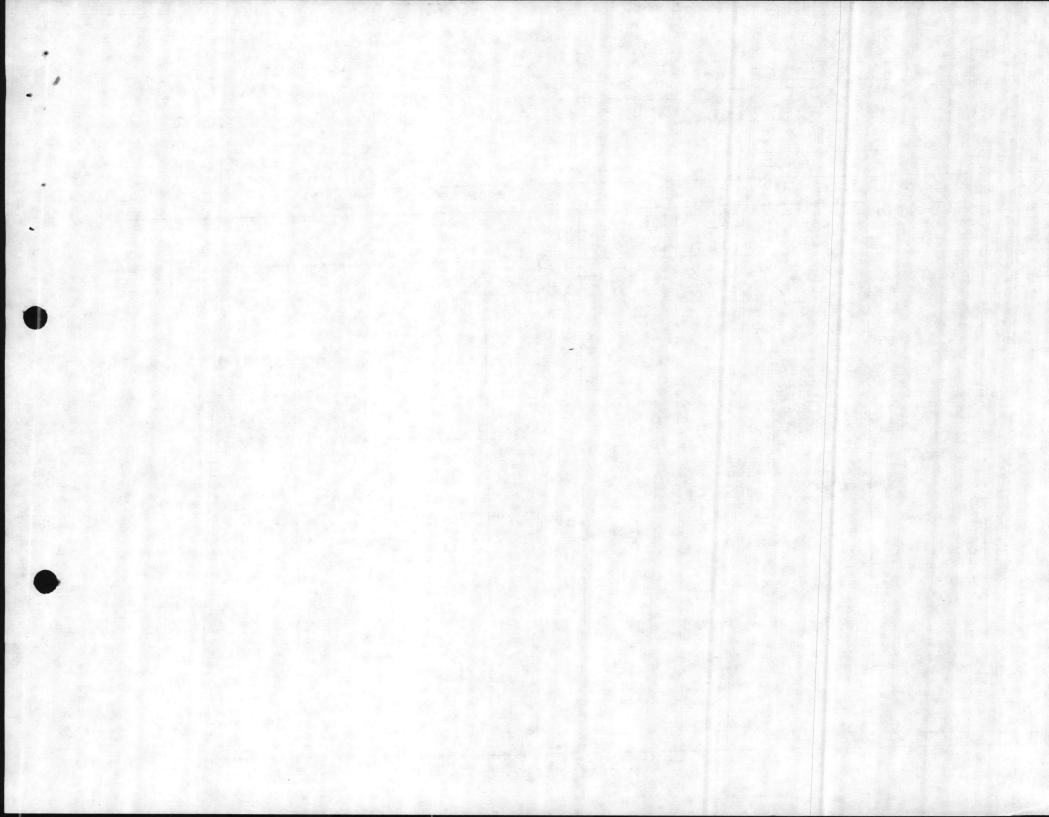
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ation: <u>Camp Lejeune</u>	Date of Receipt: 6-5-87 Turnaround: routine
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	SAMPLE ID	As mg/kg	Cd mg/kg	Cr mg/kg	Pb				
49	61-0305	<5	2,0	1.7	mg/kg 75				
					15	A.Strait			
								No.	
	4.6.84								
			17.1	.73					
							4		
					1				
							т.,		



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

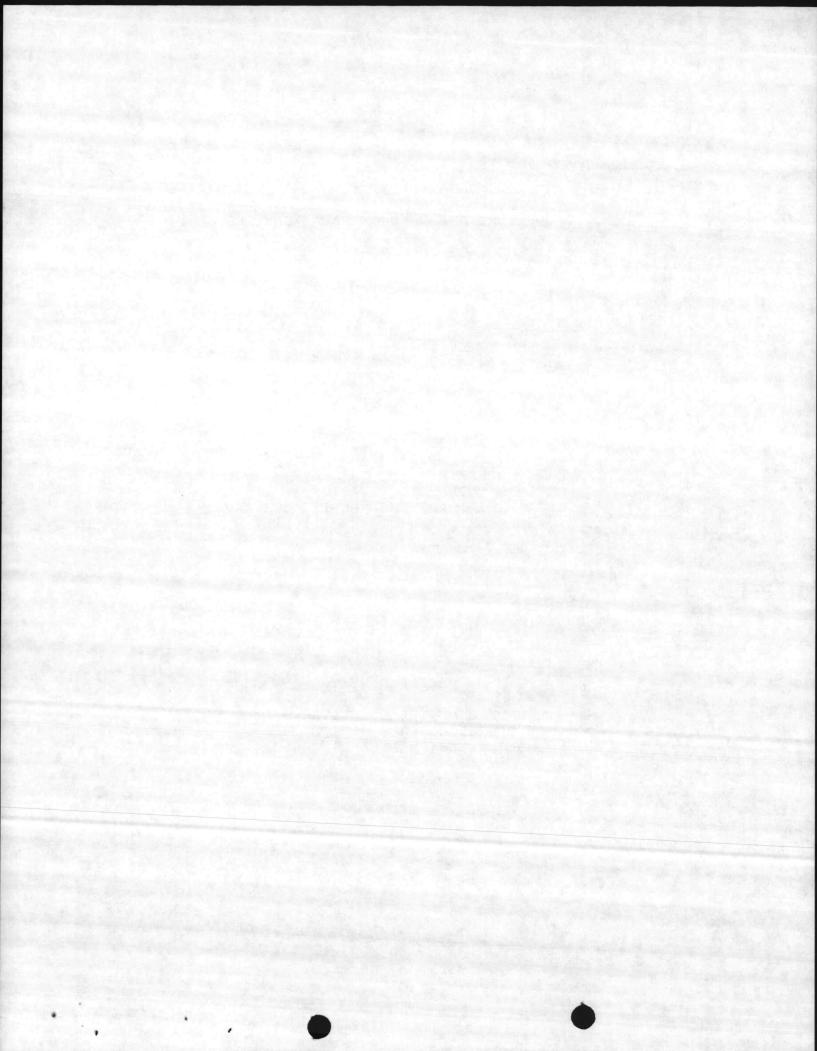
PREPARED BY:

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

JULY 8, 1987

nll

Ann E. Rosecrance Laboratory Director



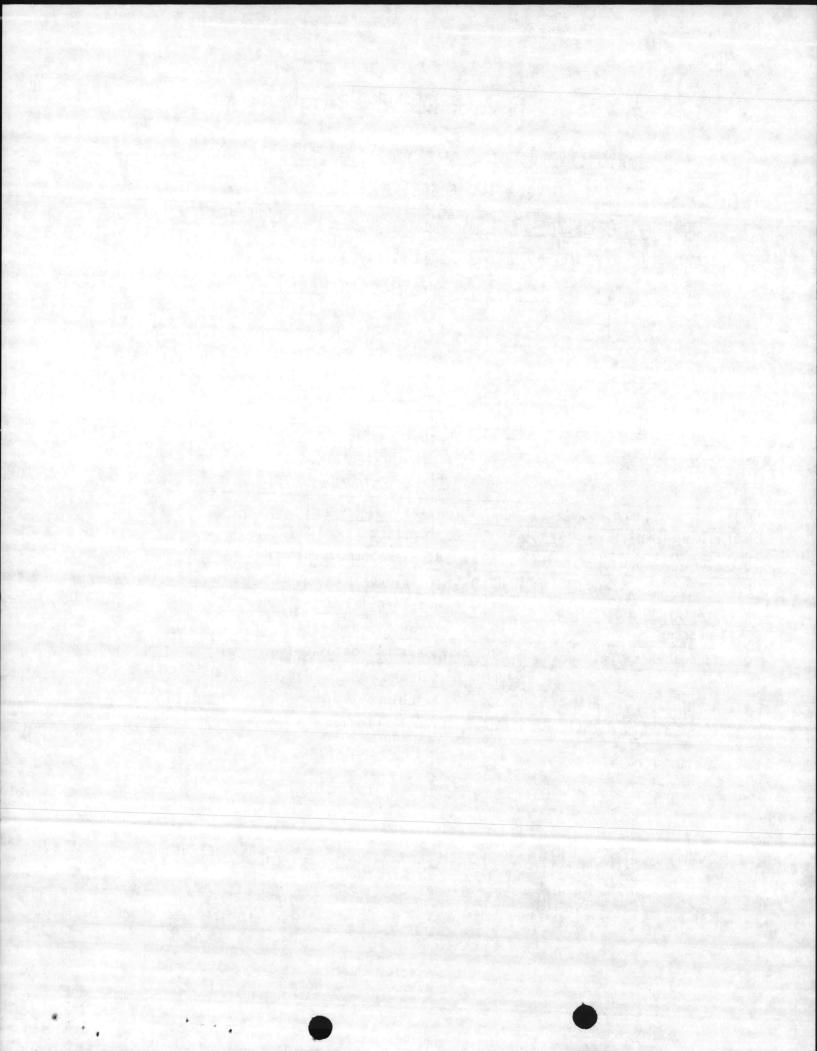
C Environmental Consultants, Inc. PRIORITY POLLUTANT ANALYSIS DATA SHEET VOLATILE FRACTION JTC SAMPLE # 61-0305/0313 Composite CLIENT SAMPLE # 87-49787-57 DATE RECEIVED 615187 CLIENT SAMPLE # 87-49787-57 DATE RECEIVED 615187 METHOD NO. 624 DETECTION LIMIT 500 ug/L

PARAMETER	RESULT ug/L	PARAMETER	RESULT ug/L
- malain	ND	1,2-dichloropropane	ND
acrolein acrylonitrile	ND	1,3-dichloropropylene	. ND
benzene 54		ethylbenzene	110* HB-
carbon tetrachloride	ND	methylene chloride	ND
chlorobenzene	ND	methyl chloride	ND
1,2-dichloroethane	ND	methyl bromide	ND
1,1,1-trichloroethane 2	30* HB	bromoform	. ND
	ND	dichlorobromomethane	ND
1,1-dichloroethane	ND	trichlorofluoromethane	ND
1,1,2-trichloroethane	ND	dichlorodifluoromethane	ND
1,1,2,2-tetrachloroethane	ND	chlorodibromomethane	ND
chloroethane	ND	tetrachloroethylene	ND
2-chloroethylvinylether	ND	toluene	990 -NB
chloroform	ND	trichloroethylene	ND
1,1-dichloroethylene	ND	vinyl chloride	ND
1,2-trans-dichloroethylene	ND	xylenes	(20 HD
Acetone 70	000		

Acetone 70,000 MEK (2-Butanone) 13,000 MIBK (4-methyl-2-pentanone) 1200 1,1,2-Trichlorotrifluoroethane ND = NOT DETECTED (freen) * = BELOW DETECTION LIMIT

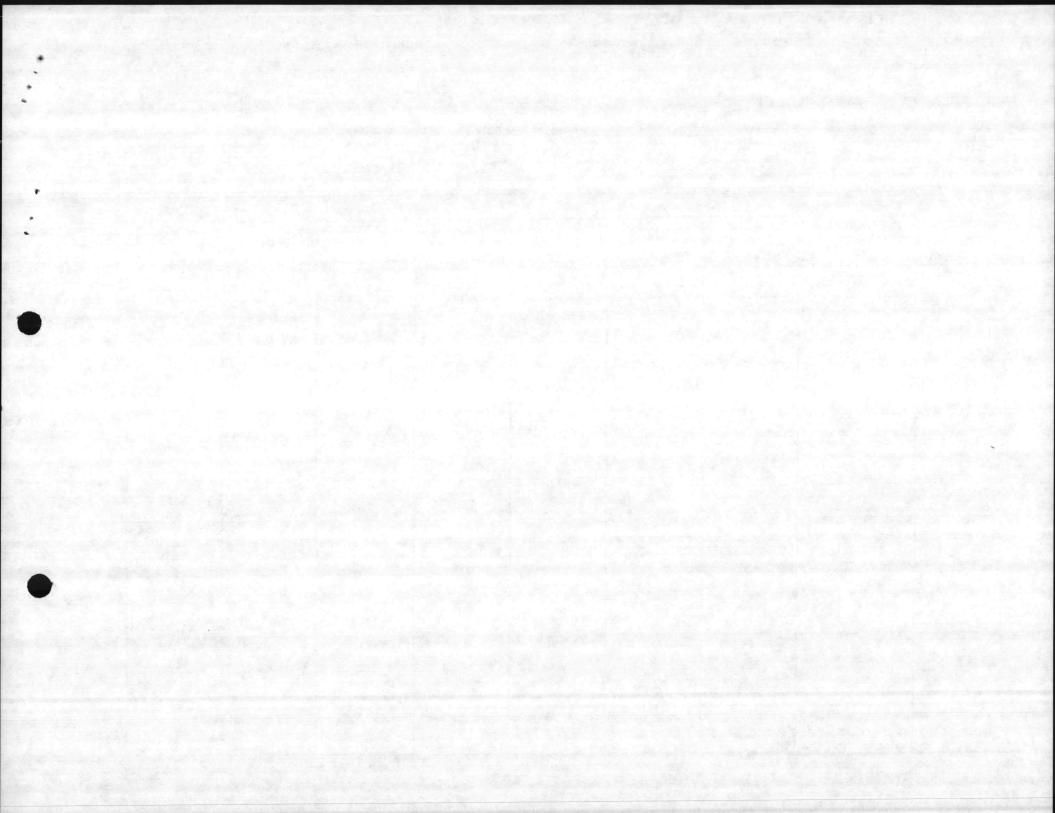
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present, concentration not availab



JTC Environmental Consultants, Inc.

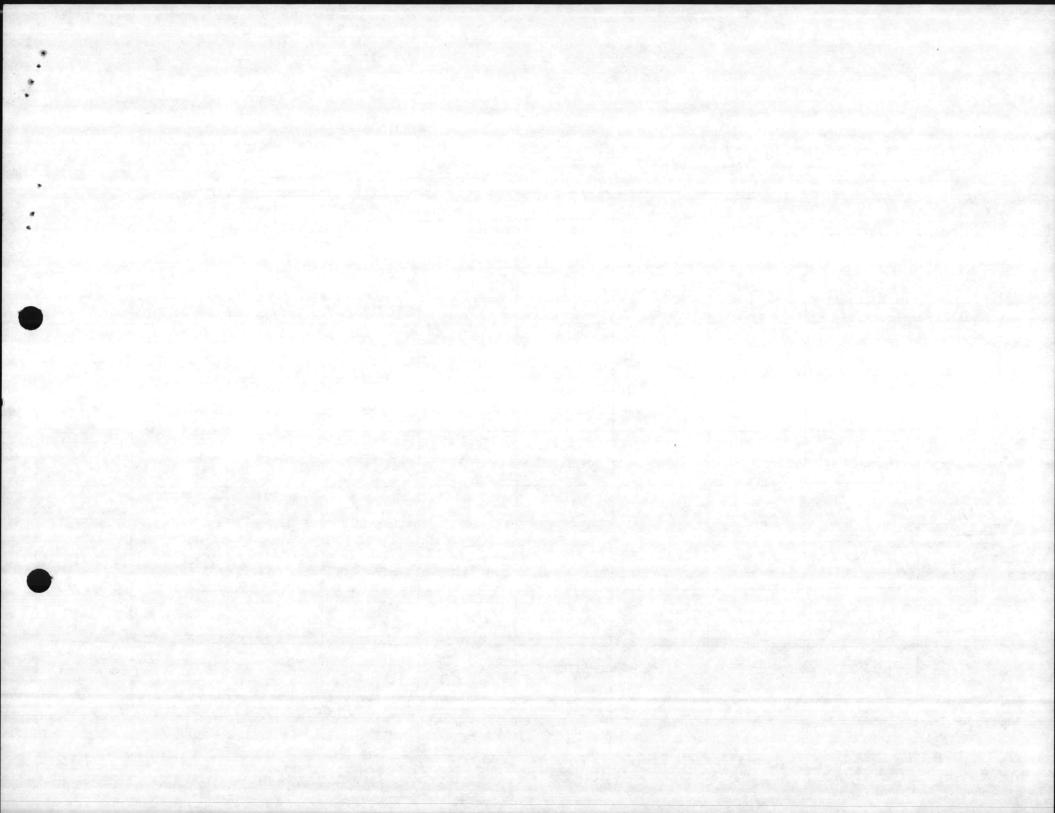
	Camp Le	and the second se		Date of Re	ceipt: 6-	5-87	Turnaround	s: routi	ne		
Date: 7-6	-87 ca	se No. 4-	2	to Naval 1	Facilities	Èngineeri	ng Command	l, Norfolk,	Virginia		
JTC Data Re	port No. 2	17-247	Table	3							
NAVY	JTC	Water Phase Composite ANALYSIS PARAMETER									
SAMPLE ID	SAMPLE ID	TOX	Phenols mg1L	VOA	As Jug 12	Cd -ug/L	Cr ug 12	Pbug/L	-		
87-49/. 87-57 composite	61-0305/ 61-0313	814	6.8	See attached sheet	498	<20	72	155			



JTC Environmental Consultants, Inc.

Location:	Camp Leje	une		Date of Re	eceipt: 6-	5-87	Turnaround	a: routin	e :
Date: 7-6	<u>-87</u> ca	se No. 4	2	to Naval	Facilities	İngineeri	ng Command	d, Norfolk,	Virginia
JTC Data Re	eport No. 8	7-247	Table	2	0.1	Phase			
NAVY	JTC				ANALYSIS				•
SAMPLE ID	SAMPLE ID	PCB Luglg	As mg1kg	Cd mg 1.kg	Cr mg 1 kg	Pb mg/kg			
87-49	61-0305	<5	NA	NA	NA	NA			
87-50	61-0306	<5	<5	<	<0.75	30			
87-51	61-0307	<5	<5	1.1	2.2	59			
87-52	61-0308	<5	<5	<1	1.6	23			
87-53	61-0309	<5	<5	<	1.6	35			
87-54	61-0310	< 10	<5	<1	2.6	26			
87-55	61-0311	<5	<5	< 1	1.3	26	•		
87-56	61-0312	<5	<5	<1	<0,75	8.2	×		
87-57	61-0313	<5	<5	<1	<0.75	28		and hay be a set	

NA- not available, results will be reported in a report addendum



stign C 1 is	
	Date of Receipt: 6-5-87 Turnaround: routine
e: 7-6-87 Case No. 42	_ to Naval Facilities Engineering Command, Norfolk, Virginia
Data Report No. 87-247 Table_	Oil Phase

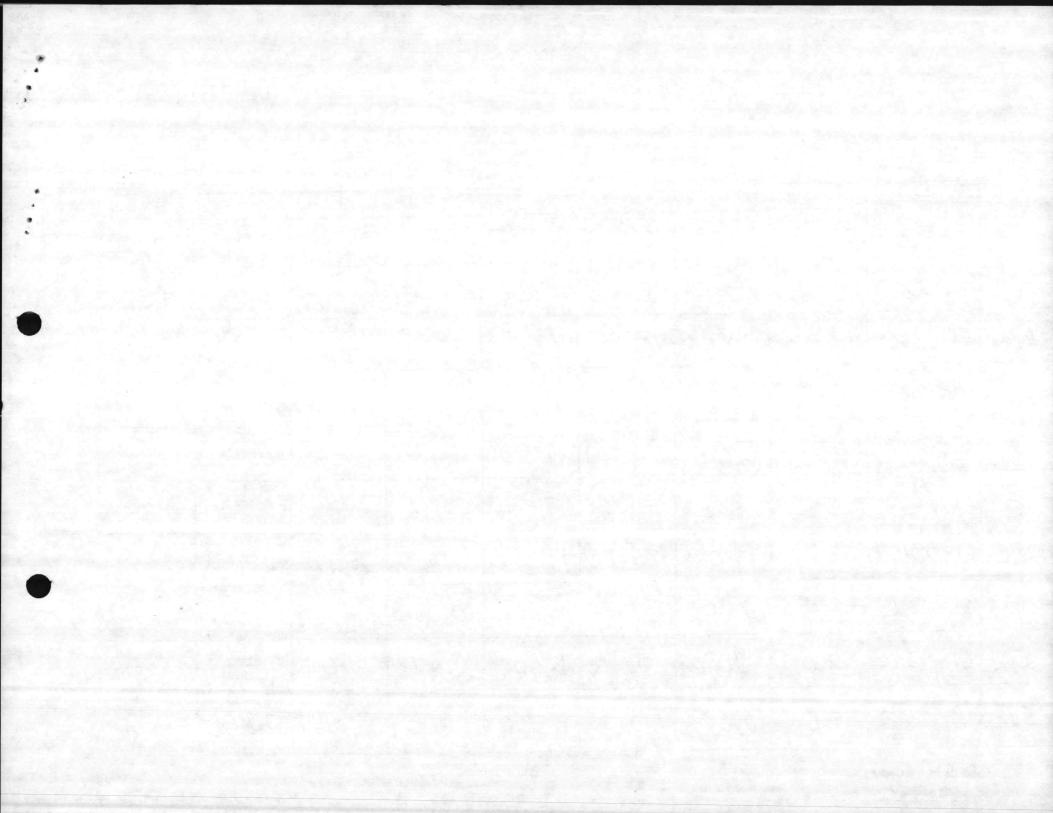
unsur callo

LIIC.

NAVY	JTC	ANALYSIS PARAMETER											
AMPLE ID	SAMPLE ID	Water 70	β5+W 7.	Viscosity e100°F, sus	BTU per 1b.	TOX 70	Flashpoint	Sp. Gravity g/m1	Sp. Gravity b				
- 49	61-0305	19.5	19.5	93,6	15,550	< 0.05	N.O. boiled at 70°	0,73	0,92				
- 50	61-0306	13.5	20.0	100.8	16,500	0.20	N.O. boiled at 50	0,77*					
- 51	61-0307	17.6	24.0	103.8	15,500	<0.05	N.O. boiled at 45°	0.72	0,96				
- 52	61-0308	0.76	0,80	53.0	19,300	0.12	35	0.73	0.88				
- 53	61-0309	8.4	13.5	100,8	17,500	0.14	40	0.73	0.93				
-54	61-0310	8.1	13.0	56.1	17,500	0,25	35	0.75	0.88				
- 55	61-0311	18.4	23.0	97.0	15,000	0.13	N.O. boiled at 45	0,76	0.98				
- 56	61-0312	12.0	17,5	104.6	16,650	0.22	40	0.73	0.89				
- 57	61-0313	19.6	22.0	120.2	15,100	<0.05	N.O. boiled at 45°	0,76	0,98				

) = not observed

* sample consisted of only one oil layer



Partial Results

JTC DATA REPORT # 87-247

LABORATORY ANALYSIS ON NAVAL SAMPLES

CONTRACT #N62470-86-C-8754

CASE # 42

3

1.

PREPARED FOR:

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

PREPARED BY:

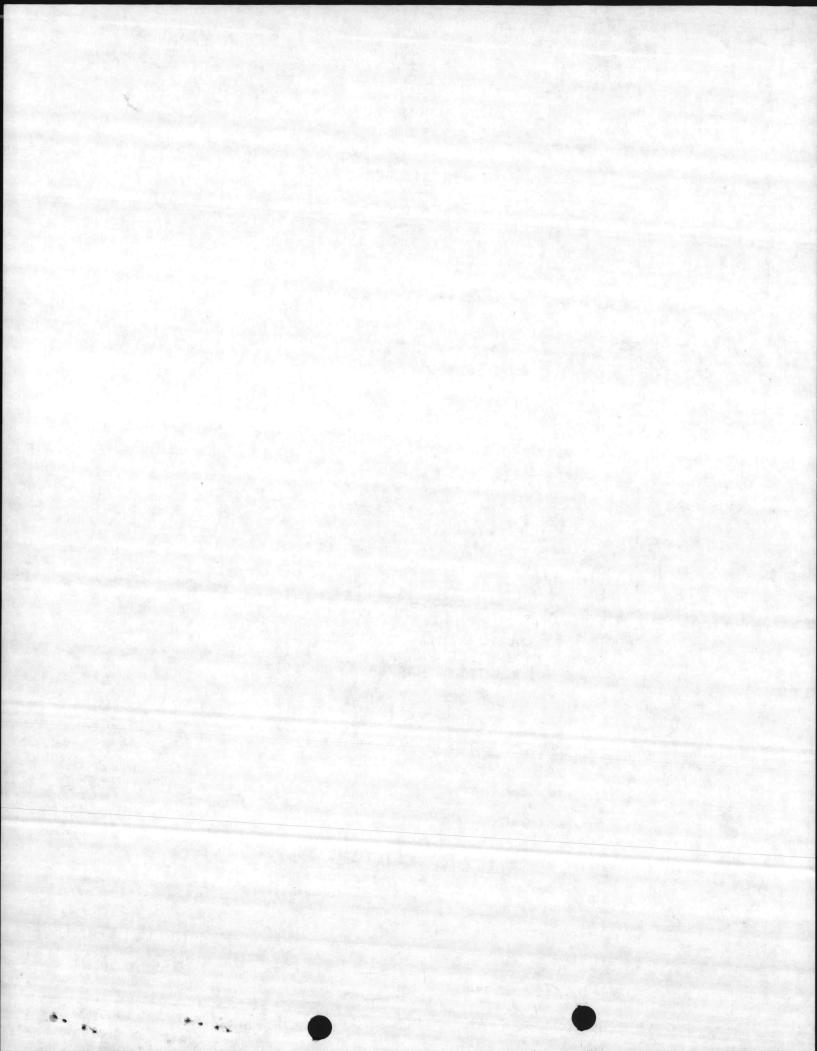
JTC ENVIRONMENTAL CONSULTANTS, INC. 4 RESEARCH PLACE, SUITE L-10 ROCKVILLE, MARYLAND 20850

JULY 6, 1987

osenance

Ann E. Rosecrance Laboratory Director

ENCLOSURE (1)



DELI	VERY ORDER INVENTORY (NON PCB)		PICKUP	REPORT	
GENERATOR MARING CORPS BASE COMPLETE ADDRESS	EPA NUMBER NC6170022580	AWARDED CONTRACT NUMBER DLA200-87-D-0045	SHADED PORTIONS TO BE COMPL	ETED BY CONTRACTING OFFICE	
CAMPLEJEUNE N.C. 28542	LEJEUNE		CONTRACT NUMBER	DELIVERY ORDER NUMBER	
COR <u>GEORGE EGGERS</u> L. HUNTER COMMERCIAL PHONE NUMBER	NEW RIVER AIR STATION TANK AUTOVON PHONE NUMBER	AS-421 AS-420	AUTHORIZED TRANSPORTER NAME EPA NUMBER SDF NAME EPA NUMBER AUTHORIZED TRANSPORTER SIGNATURE AUTHORIZED CONTRACTING OFFICERS REPRESENTATIVE (COR)		
COMMERCIAL PHONE NUMBER (919) 451-5613 15652 GENERATOR REQUEST NUMBER	484-5613 1.5652				
GENERATOR REQUEST NUMBER	RIC CODE SWA				
	DATE ACCEIVED BY CONTRACTING				
1 2 . 3 NSN 4 DTID	5 ITEM NAME CONTAINER STORAGE US DOT DESCRIPTION LOCATIO		12 13 PICKED UP	14 PICKUP 15 MANIFEST NUMBER DATE	
LISN DODAAC DATE SERIAL	DRUM NUMBER		CODE QUANTITY UNIT	LINE CODE PICKED UP DDMMYY	
19142 00 KHY M 93182 1214 0003	WASTEDIL GROUNDTAUR AS-42				
4742 00 AB M93182 7274 000 4	11 " " TANK 11 " AS-421	30,000 GL			
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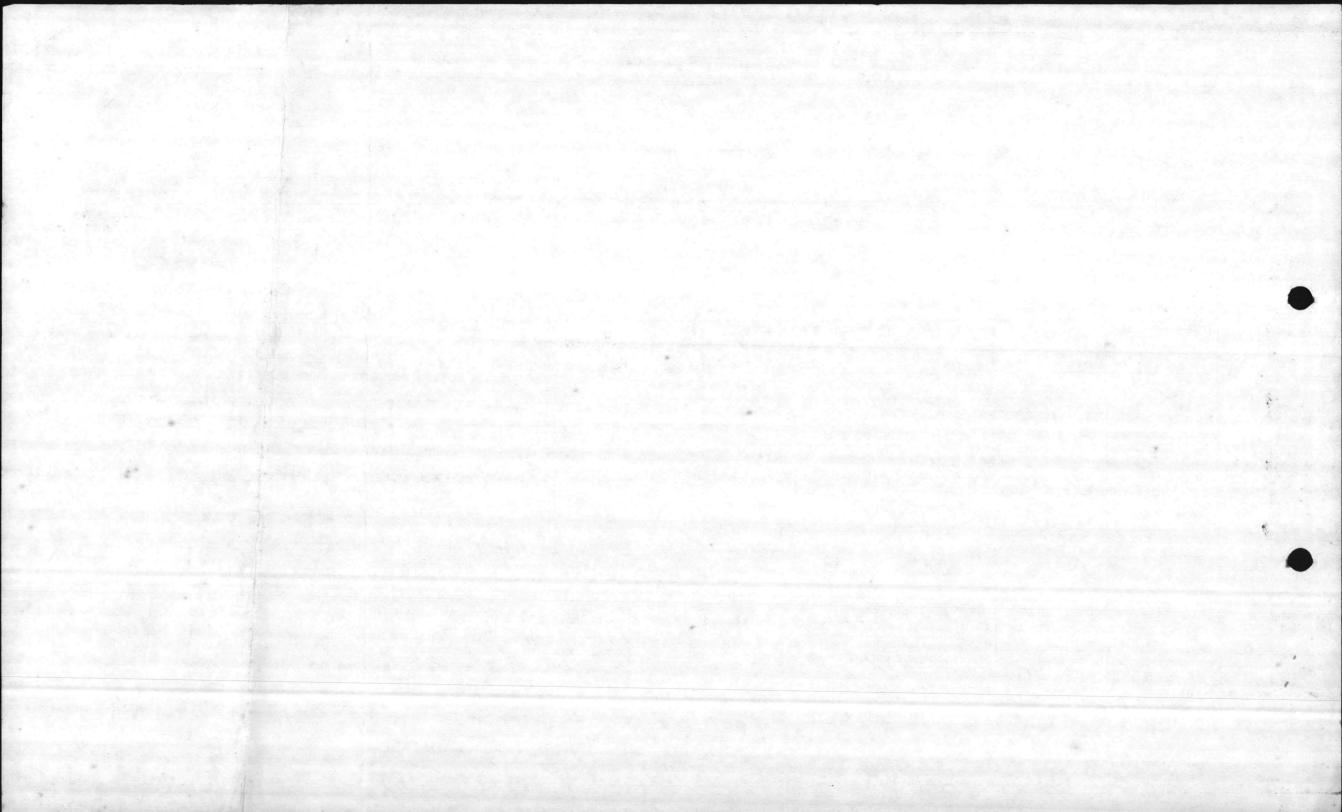
HO DRMS Jun 86 1786 (Previous edition to be used until exhausted)

24

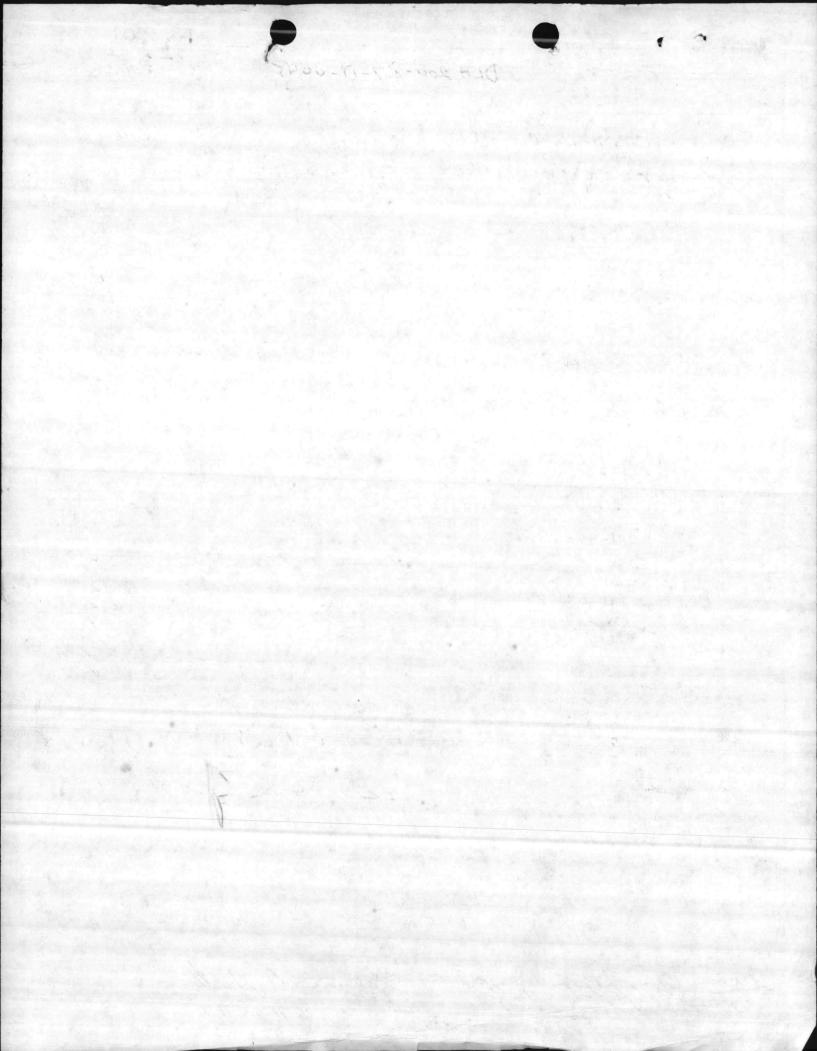
(SEE REVERSE FOR ALOTHO, AF REMARKS IF APPLICABLE)

PAGE

OF



COLLECTION SI	JMMARY REPORT	TRACT NO.	DELIVERY ORDER NO.	ano interno por ellargada	
	D	LA 200-87-D-0		STREET, STREET	-
	m and submit it to the DRMS Contrac Iress of the DRMS Contracting Officer		ng days from the time that the contractor lea ed contract and/or delivery order.	ves the	
A. DESCRIPTION OF	1. Actual location of chemicals	no orden da de martino de la companya de la company	2. RIC		mangin
CHEMICAL	MARINE CORDS	Air Station	54-2014		
COLLECTION SITE	MARINE CORPS Complejeune, 1	10	3. Accountable DRMO		
	I comp rejeane, r	U.G. Tank-12			
	delivery order. If not provided, state		50 or DRMS–1697, Pickup Report, as applica py of annotated inventory.	able	
	r differences between the quanity of d	chemicals collected and the quantity	y of chemicals shown in the contract and/or	delivery	
2. Please fill in the colum CLIN	ns describing the number of containe ITEMS	ers requiring overpacking, repacking, QUANTITY	, draining,etc., if any. REMARKS		
C. EVALUATION	1. Date of contractor arrival $11 - 06 - 87$	 Please check either S (satisfact contractor's performance and encountered, if any. 	tory) or U (unsatisfactory) for each phase of I specify any problems and/or positive actions	s S	
OF		a. Adequacy of Contractor/CO	OR briefing/notification	V	
CONTRACTOR'S	2. Date of contractor departure	b. Adequacy of repackaging		V	
PERFORMANCE	11-06-87	 c. Final clean—up and deconta d. Safety of personnel 	amination	-	
		e. Number of trucks used		11	
D. DOCUMENTATION R				YES	N
D. DOCUMENTATION D	ECEIVED Check each document	received by PDO for filing	a. Manifest	V	
Di Docomentarion n					
	DE ANY SPECIFIC COMMENTS YO	U MAY HAVE REGARDING OVE	b. Form DD 250 (or DRMS Form 1697)	V	
E. REMARKS - INCLU	DE ANY SPECIFIC COMMENTS YO OR COMMENTS (on improving this		RALL CONTRACTOR PERFORMANCE,	F	
E. REMARKS - INCLU			RALL CONTRACTOR PERFORMANCE,		
E. REMARKS – INCLUR ANY SUGGESTIONS	OR COMMENTS (on improving this	contract, COR letter, Summary Rep	RALL CONTRACTOR PERFORMANCE, port, etc.)		
E. REMARKS – INCLU ANY SUGGESTIONS		contract, COR letter, Summary Rep	RALL CONTRACTOR PERFORMANCE, port, etc.)		



1 7-5	SWM-51:REV. 6/87 Please p	F	of Waste Manage P. O. Box 2063 risburg, PA 17120 esigned for use on e	na sha Nga sangara	ch) typewri	ter.)			Form approved. OMB No. 2050-003 Expires 9-30-88	
	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's U		Ma	nifest nent No.). O. O. 9	2. Pag of	is not re	tion in the s equired by F equired by S		
	3. Generator's Name and Mailing Address New River Air Station C/O Marine Corps Base Gameratorie Phone, (NC 28542 PH	919 451-5613	3			P/ B. State	Manifest Do B 4 6 Gen. ID	And a second	Contraction of the state of the	
	5 Transporter 1 Company Name	6.		D Number	43.6	C. State	Trans. ID			
-	7. Transporter 2 Company Name	8.	US EPA	D Number	0.61		-AH sporter's Phon	ne (204)	198-789	
L		2	The state of the second		19. ³ -1.18	E. State	Trans. ID		1 10 101	
	9. Designated Facility Name and Site Address	>1	D. US EPA II	O Number		and the second second	-AH		9	
1	21 # 2 anddale	el .	# = DADA	-77-	185		Facility's ID		Required	
	nowood N.C.	. 281281	N.C. D.O.O.C	.1.13		and the second se	ty's Phone (74-5399	
	11. US DOT Description (Including Proper Shipp	ing Name, Hazard Cla	ss, and ID Number)		12. Conta No.	ainers Type	13. Total Quantity	14. Unit Wt/Ve		
	a. RQ Waste Oil, NOS Combustible Liquid UMM,	1370	F0 D0	ALC: ALC: ALC: ALC: ALC: ALC: ALC: ALC:	001	TI	2200	. G	F001 D001.	
al a second	b.			N. Mary an	1. N. J. S.	a de la compañía de la	M. C. T.			
100	the second of the			9	Server and a	e e e	19	· All Hale	1. A. 1.	
March 1	C.	a share the			- RAU		1- 1. n.a	1. SE21		
- ALCON			an a	48 52			·	1. S. C. S.		
1.000 L	d.	1								
And contracts	J. Additional Descriptions for Materials Listed Al Haz. Code Physical State	bove <i>(include physical</i> Haz. Co			1.10: - Ar	K. Hand	ing Codes for	Wastes Lis	ted Above	
And South and South	a. ITT L CLIN 4742	2 c.		CLIN		a. SO		c. 5	01	
- C	b. CLIN	d. []		CLIN		b. 50.	1	d. \$	01	
A State	15. Special Handling Instructions and Additional Information DLA200-87-D-0045 # 0062 a. Oil with freen d									
1 100 10	16. GENERATOR'S CERTIFICATION: I classified, packed, marked, and labeled, and are in If I am a large quantity generator. I certify that I practicable and that I have selected the practicable and the environment, OR, if I am a small quantit available to me and that I can afford.	all respects in proper con have a program in place	to reduce the volume	highway acc and toxicity	ording to app of waste ger	licable inter reted to the tot	national and na ne degree I have as the present a	tional govern e determined and future thr	ment regulations. to be economically eat to human health	
1	Printed/Typed Name HUMTER L.E.	A. A. State	Signature	in	& N	lute	ater	M	onth Day Yes	
10000	17. Transporter 1 Acknowledgement of Receipt Printed/Typed Name Frank Dennis	of Materials	Signature	nh	Den	nie	A	Market Market	onth Bay See	
	18. Transporter 2 Acknowledgement of Rece Printed/Typed Name	ipt of Materials	Signature			Maria Maria	1	M	lonth Day Yea	
	19. Discrepancy Indication Space	and albert in the second						n ar an an Roinn an an Anna		
	20. Facility Owner or Operator: Certification of	receipt of hazardous r	materials covered by	this mani	fest except	as noted	n Item 19.			
ł	Printed/Typed Name	1.46.12.3	Signature	an a		10		M	onth Day Yea	

Sale of the

INSTRUCTIONS FOR COMPLETION OF THE PA HAZARDOUS

Please read these instructions before completing this form-

行物的法律师

GENERAL INFORMATION

This Hazardous Waste Manifest consists of eight copies. As the Manifest is completed the copies are removed from back to front.

For interstate shipments, the copies of the manifest shall be distributed as indicated at the bottom of each copy.

For shipments within Pennsylvania, the Generator shall retain Copies 3, 4, and 8. The TSD Facility shall retain Copies 1, 2, and 6.

If there are more than four different waste streams in a shipment, except for lab packs, complete another Manifest. If there are more than two transporters or if the waste is a lab pack, use the Uniform Hazardous Waste Manifest Continuation Sheet. Continuation Sheets may be purchased commercially.

If you have any questions concerning the completion of this Manifest, call 717-787-6239.

NOTE: For interstate shipments you may be required to supply additional information regarding the completion of lettered Items A through K. Please check with both the Generator and Destination States for specific requirements.

GENERATOR

- Item 1. Generator's US EPA ID No. Enter the twelve digit US EPA Identification Number. Manifest Document No. The generator must assign a unique five digit number.
- Item 2. Page 1 of _____ Enter the total number of pages used to complete this Manifest including the first page plus the number of Continuation Sheets, if any.
 Item 3. Generator's Name and Mailing Address Enter the complete name of the generator and the complete mailing address. The address should be the location that will manage the returned Manifest forms.
- Item A. State Manifest Document Number This Number is preprinted; do not alter it. This Number must be placed in item L of each continuation sheet.
- Item B. State Gen. ID Not required for PA Generators. See Note (above).
- Item 4. Generator's Phone Number Enter the area code and telephone number where an authorized agent of the Generator may be contacted.
- Item 5. Transporter 1 Company Name Enter the complete company name of the first transporter who will transport the waste.
- Item 6. US EPA ID Number Enter the twelve digit US EPA Identification Number of the transporter identified in Item 5.
- Item C. State Trans. ID Enter the Hazardous Waste Transporter License No. issued by PA Dept. of Environmental Resources. See Note (above).
- Item D. Transporter's Phone Enter the area code and telephone number where an authorized agent of the Transporter may be contacted.
- Item 7. Transporter 2 Company Name If applicable, see Item 5.
- Item 8. US EPA ID Number If applicable, see Item 6.
- Item E. State Trans. ID If applicable, see Item C. Item F. Transporter's Phone - If applicable, see Item D
- Item F. Transporter's Phone If applicable, see Item D.
- Item 9. Designated Facility Name and Site Address Enter the complete company name and complete site address of the facility designated to receive the waste listed on this Manifest. The address must be the site address, which may differ from the mailing address.
- Item 10. US EPA ID Number Enter the twelve digit US EPA Identification Number of the Designated Facility,
- Item G. State Facility's ID Not Required.

Item H. Facility's Phone - Enter the area code and phone number where an authorized agent of the Designated Facility may be contacted.

- Item 11. US DOT Description [Including Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number)] Enter the US DOT Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number) for each waste as identified in 49 CFR 171 through 177.
- Item 12. Containers (No. and Type) Enter the number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

Item 13. Total Quantity - Enter the total quantity of each waste. Do not use decimals or fractions.

Item 14. Unit (Wt/Vol) - Enter the appropriate abbreviation from Table II (below) for the unit of measure

Table I – Types	of Containers	Table II – Un	its of Measure
DM = Metal drums, barrels, kegs	DT = Dump truck	G = Gallons (liquids only)	L=Liters (liquids only)
DW = Wooden drums, barrels, kegs	CY = Cylinders	P = Pounds	K = Kilograms
DF = Fiberboard or plastic drums,	CM = Metal boxes, cartons, cases	T = Tons (2000 lbs)	M = Metric tons (1000 kg)
barrels, kegs	(including roll-offs)	Y = Cubic yards	N = Cubic meters
TP=Tanks portable	CW = Wooden boxes, cartons, cases	and a second second	and a second
TT = Cargo tanks (tank trucks)	CF = Fiber or plastic boxes, cartons,cases	1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -	
TC = Tank cars	BA - Burlen cloth namer or plactic hara	*** **********************************	

C = Tank cars BA = Burlap, cloth, paper or plastic bags

Item I. Waste No. - Enter the Hazardous Waste No. of the waste or wastes. Refer to Section 75.261 of the Department's Regulations. See Note (above). If a waste is not hazardous in PA but regulated by another State, enter that State's waste code. Also, enter in Item J, "This waste is not a hazardous waste according to PA law."

Item J. Additional Descriptions for Materials Listed Above (include physical state and hazard code) - Enter the physical state of each waste (S-solid, L-liquid, SL-sludge or G-gas) and the hazard code or codes that correspond to the Hazardous Waste No. (I-ignitable, C-corrosive, R-reactive, E-EP toxic, H-acute hazardous, and T-toxic). See Note (above).

Item K. Handling Codes for Wastes Listed Above - Not required for PA Generators. See Note (above).

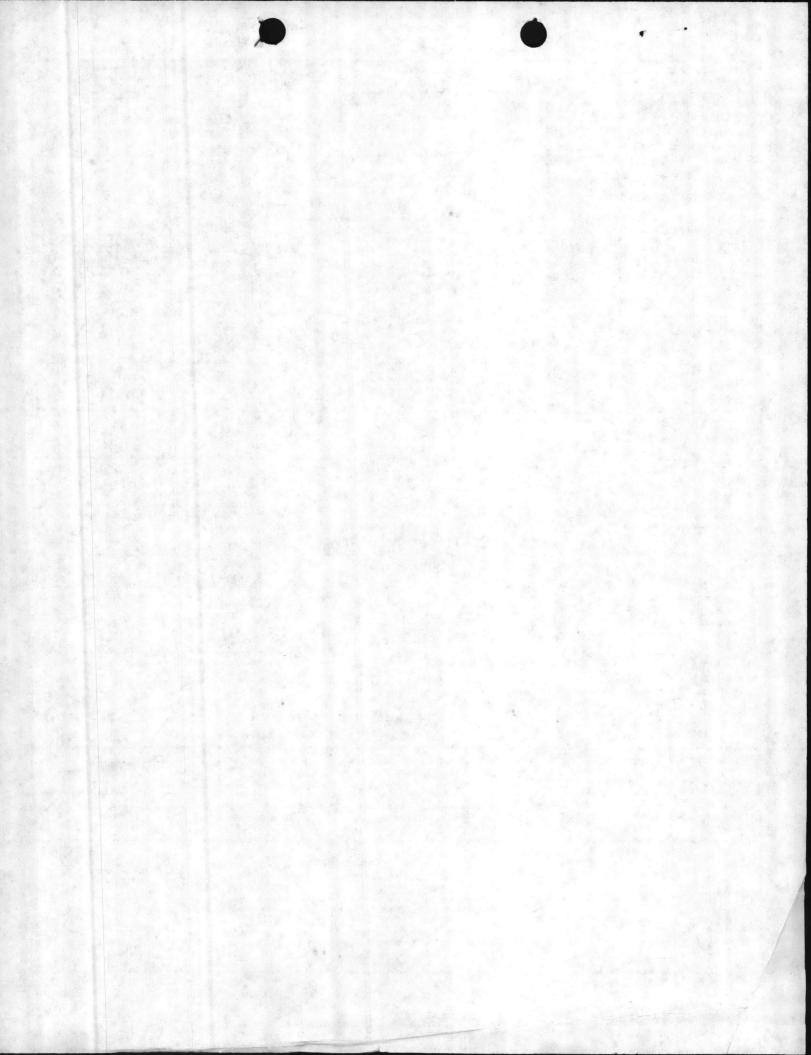
Item 15. Special Handling Instructions and Additional Information - Use this space to indicate special transportation, treatment, storage, or disposal information or Bill of Lading information. For international shipments, enter the point of departure (City and State).

- Item 16. Generator's Certification Read and sign by hand the certification statement. Enter the date the waste was shipped. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g., and rail) in the space below the certification statement.
- TRANSPORTER
- Item 17. Transporter 1 Acknowledgement of Receipt of Materials Print or type the name of the person accepting the waste on behalf of the transporter. Sign and enter the date of receipt.
- Item 18. Transporter 2 Acknowledgement of Receipt of Materials If applicable, see Item 17.

DESIGNATED FACILITY

- Item 19. Discrepancy Indication Space The Designated Facility's authorized representative must note in this space any significant discrepancy between the waste described on the Manifest and the waste actually received.
- Item 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Print or type the name of the person accepting the waste on behalf of the owner or operator of the facility. Sign and enter the date of receipt.

SWM-51:REV. 6/87 Please print	P. Harris	Waste Management O. Box 2063 burg, PA 17120 gned for use on elite (12	-pitch) typewr	iter.)			Form approved. OMB No. 2050-003 Expires 9-30-88
KA GODE STEPPED THE SHERE SHERE AND ADDRESS AND ADDRESS AND ADDRESS ADDRE	1. Generator's US N. C. S. 1. 7. 0	EPA ID No.	Menifeet acuments No. 9	2. Par of	is not re	ion in the sh quired by Fe quired by St	deral law
Generator's Name and Mailing Address New River Air Station C/O Marine Corps Base	and a second performance of the second performance of the second performance of the second performance of the s The second performance of the secon	n Salashi Turkin S 41 - Salashi Salashiri 2		P	AB 46	322	94
Computations, INC 28542 PH 91	19 451-5613		Brith Roll Built B	a den se a la	SAME		
Thereforer 1 Company Name	6/	A. DO. 4.0.	9.13.6	ALC: NOT THE REAL PROPERTY OF	Trans, ID		1
7. Transporter 2 Company Name	8.	US EPA ID Num	bor	D. Tra	nsporter's Phone	8091	198-789
an la na Rille na Carlo ana ang ang ang ang ang ang ang ang ang				Contraction 15-	o Trans. ID		1
B. Designated Facility Name and Site Address	DA 10.	US EPA IO Numt	var		sporter's Phone	· (788)	1/139
Rt # 2. apuddafe	NIRCIRC	C.D.O.0.0.7.7	2155	and the open states of the second	ra Facility's ID	the states again the second	Required
Marwood M.C.			12. Cont		lity's Phone (A	14.	14-351
11. US DOT Description (Including Proper Shipping I	wame, Hazaro Glass,	, and 10 Number)	No.	Туре	Total Quantity	Unit Wt/Vo	
RQ Waste Oil, NOS Combustible Liquid &M P3,	70	F001 D001	00.1	1.1	2200	G	F 001
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d.	in Polyana (auto ang at		·····································	di desert	entropale text		
	The west with the second		In the second	Autor I			
J. Additional Descriptions for Materials Listed Above			and the second	K. Hand	tiling Codes for	Wastes List	ed Above
Haz. Code Physical State	Haz. Code	Physical State CLZ		-	anonical refi	1 ~	
a. Later Like prove wind	<u>c. L.L.</u>	La Chi		a. 50		c. SC	17
b. CLIN	a. L.J.	L] CLI	N	5.50	1	d. \$6	1
15. Special Handling Instructions and Additional Info	ormation DLA200	-87-D-0045	# 0	062			
a. Oil with freen							
a. Oil with freon	Contraction of the second s	a long to the second to the second				Contraction of the second	
16. GENERATOR'S CERTIFICATION: I here classified, packed, marked, and labeled, and are in all re If I am a large quantity generator, I certify that I have	espects in proper condition a program in place to	tion for transport by highway reduce the volume and toxi	according to app city of waste ger	licable inte erated to	ernational and nati the degree I have	determined t	o be economically
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(SEE REVERSE FOR ADDITIONAL REMARKS IF APPLICABLE)

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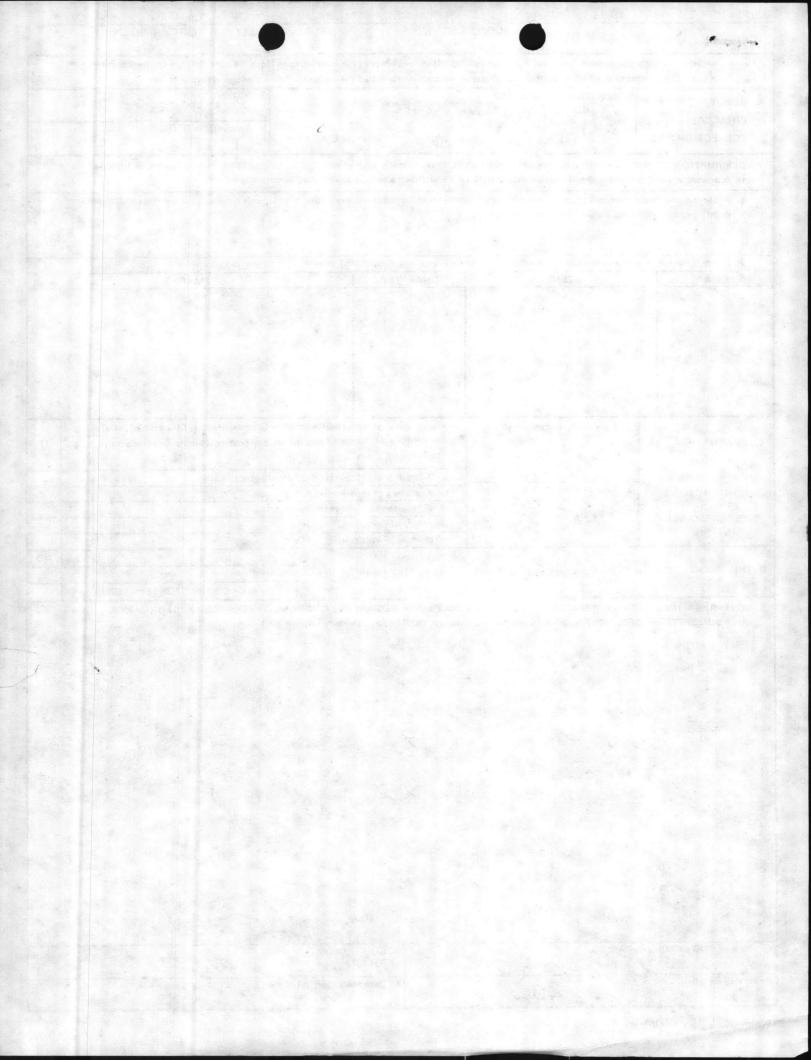
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		acting Officer within ten (10) workin er is included on Page 1 of the enclose	g days from the time that the contractor leave	s the	
A. DESCRIPTION OF CHEMICAL	1. Actual location of chemicals MORINE Colls A		2. RIC SY-2014		
COLLECTION SITE	CAmp Lejeune,	NC TANK#1	20 3. Accountable DPDO LEIENNE		
		LLECTED. (Attach copy of DD-25 te why and attach a description or co	0 or DPDS-1697, Pickup Report, as applicab	le	
	y differences between the quanity of ditional documents as necessary)	f chemicals collected and the quantity	of chemicals shown in the contract and/or de	elivery	
2. Please fill in the c	olumns describing the number of co	ntainers requiring overpacking, repack	ing, draining, etc., if any.		-
CLIN	ITEMS	QUANTITY '	REMARKS		
C EVALUATION	1. Date of contractor arrival	3. Please check either S (satisfact contractor's performance and encountered, if any.	ory) or U (unsatisfactory) for each phase of specify any problems and/or positive actions	S	T
OF	11-03 81	a. Adequacy of Contractor/Co	OR briefing/notification	V	+
CONTRACTOR'S	2. Date of contractor departure	b. Adequacy of repackaging		V	t
PERFORMANCE	11-05-87	c. Final clean-up and decont	amination	V	I
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	d. Safety of personnel e. Number of trucks used		2	╀
				YES	t
D. DOCUMENTATION	RECEIVED Check each documen	nt received by PDO for filing	a. Manifest	5	
E. REMARKS - INCLU	DE ANY SPECIFIC COMMENTS Y	OU MAY HAVE REGARDING OVE is contract, COR letter, Summary Re	b. Form DD 250 (or DPDS Form 1697) RALL CONTRACTOR PERFORMANCE,	V	L
Name of PDO submittin DRMO CAM	ng report Lejeune No of COR t. Hunter	3. COF/Signature	u b. Huntu		

10	DDDC	Form	1720
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R-SI	Har	of Waste Management P. O. Box 2063 risburg, PA 17120 esigned for use on elite (12-p	itch) typewr	iter.)			Form approved. OMB No. 2050-003 Expires 9-30-88
	UNIFORM HAZARDOUS 1. Generator's U WASTE MANIFEST N.C.8.1.7.	JS EPA ID No. 0. 0. 2. 2. 5. 7. 0 A.≾	anifest ment No. 0.0.8	2. Pag of	ie not require	d by Fe	deral law
3.	Generator's Name and Mailing Address New River Air Station ZMarine Corps Camp LEJuene, NC 28542	Base 🛼		P	te Manifest Docume AB 463 te Gen. ID		<u>5</u>
5.	. Generator's Phone (919) 451 5613 . Transporter 1 Company Name 6.			SAN C. Stat	te Trans. ID		
100	GIdover CorpoRATIEn Transporter 2 Company Name 8	UA-D-0-4-0-15-9 US EPA ID Number			nsporter's Phone (• •	
9.	DISOURY CORPORATION	0. US EPA ID Number	1. 	P/	e Trans. ID A-AH		78-7781
	NOTWOOD, N.S. 28128	N.C.DOO.0.9.73	the second s	G. Stat H. Faci	te Facility's ID ility's Phone (709	Not	Required
1	1. US DOT Description (Including Proper Shipping Name, Hazard Cla	ass, and ID Number)	12. Conta No.	ainers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
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J.	Additional Descriptions for Materials Listed Above (include physical Haz. Code Physical State Haz. Co		11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	K. Hand	dling Codes for Was	tes Liste	ad Above
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A State

INSTRUCTIONS FOR COMPLETION OF THE PA HAZARDOUS

Please read these instructions before completing this form -

GENERAL INFORMATION

This Hazardous Waste Manifest consists of eight copies. As the Manifest is completed the copies are removed from back to front

For interstate shipments, the copies of the manifest shall be distributed as indicated at the bottom of each copy.

For shipments within Pennsylvania, the Generator shall retain Copies 3, 4, and 8. The TSD Facility shall retain Copies 1, 2, and 6.

If there are more than four different waste streams in a shipment, except for lab packs, complete another Manifest. If there are more than two transporters or if the waste is a lab pack, use the Uniform Hazardous Waste Manifest Continuation Sheet. Continuation Sheets may be purchased commercially.

If you have any questions concerning the completion of this Manifest, call 717-787-6239.

NOTE: For interstate shipments you may be required to supply additional information regarding the completion of lettered Items A through K. Please check with both the Generator and Destination States for specific requirements.

GENERATOR

- Item 1. Generator's US EPA ID No. Enter the twelve digit US EPA Identification Number. Manifest Document No. The generator must assign a unique five digit number.
- Item 2. Page 1 of _____ Enter the total number of pages used to complete this Manifest including the first page plus the number of Continuation Sheets, if any.
 Item 3. Generator's Name and Mailing Address Enter the complete name of the generator and the complete mailing address. The address should be the location that will manage the returned Manifest forms.

Item A. State Manifest Document Number - This Number is preprinted; do not alter it., This Number must be placed in item L of each continuation sheet.

Item B. State Gen. ID - Not required for PA Generators. See Note (above).

Item 4. Generator's Phone Number - Enter the area code and telephone number where an authorized agent of the Generator may be contacted.

Item 5. Transporter 1 Company Name - Enter the complete company name of the first transporter who will transport the waste.

Item 6. US EPA ID Number - Enter the twelve digit US EPA Identification Number of the transporter identified in Item 5.

Item C. State Trans. ID - Enter the Hazardous Waste Transporter License No. issued by PA Dept. of Environmental Resources. See Note (above).

Item D. Transporter's Phone - Enter the area code and telephone number where an authorized agent of the Transporter may be contacted.

Item 7. Transporter 2 Company Name - If applicable, see Item 5.

Item 8. US EPA ID Number - If applicable, see Item 6.

- Item E. State Trans. ID If applicable, see Item C.
- Item F. Transporter's Phone If applicable, see Item D.
- Item 9. Designated Facility Name and Site Address Enter the complete company name and complete site address of the facility designated to receive the waste listed on this Manifest. The address must be the site address, which may differ from the mailing address.

Item 10. US EPA ID Number - Enter the twelve digit US EPA Identification Number of the Designated Facility.

Item G. State Facility's ID - Not Required.

Item H. Facility's Phone - Enter the area code and phone number where an authorized agent of the Designated Facility may be contacted.

Item 11. US DOT Description [Including Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number)] - Enter the US DOT Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number) for each waste as identified in 49 CFR 171 through 177.

Item 12. Containers (No. and Type) - Enter the number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

Item 13. Total Quantity - Enter the total quantity of each waste. Do not use decimals or fractions.

	11-14 /10/4/1/-11				

Table I - Types	of Containers	Table II - Units of	Measure	
DM = Metal drums, barrels, kegs	DT = Dump truck	G=Gallons (liquids only)	L = Liters (liquids only)	
DW = Wooden drums, barrels, kegs	CY = Cylinders	P = Pounds	K=Kilograms	
DF = Fiberboard or plastic drums,	CM = Metal boxes, cartons, cases	T = Tons (2000 lbs)	M = Metric tons (1000 kg)	
barrels, kegs	(including roll-offs)	Y = Cubic yards	N=Cubic meters	
TP = Tanks portable	CW = Wooden boxes, cartons, cases	dependent per		
TT = Cargo tanks (tank trucks)	CF = Fiber or plastic boxes, cartons, cases		and the second	
TC = Tank cars	RA = Burlan cloth paper or plastic bans	The Real Street Street	the set of the	

Item I. Waste No. - Enter the Hazardous Waste No. of the waste or wastes. Refer to Section 75.261 of the Department's Regulations. See Note (above). If a waste is not hazardous in PA but regulated by another State, enter that State's waste code. Also, enter in Item J, "This waste is not a hazardous waste according to PA law."

Item J. Additional Descriptions for Materials Listed Above (include physical state and hazard code) - Enter the physical state of each waste (S-solid, L-liquid, SL-sludge or G-gas) and the hazard code or codes that correspond to the Hazardous Waste No. (I-ignitable, C-corrosive, R-reactive, E-EP toxic, H-acute hazardous, and T-toxic). See Note (above).

Item K. Handling Codes for Wastes Listed Above - Not required for PA Generators. See Note (above).

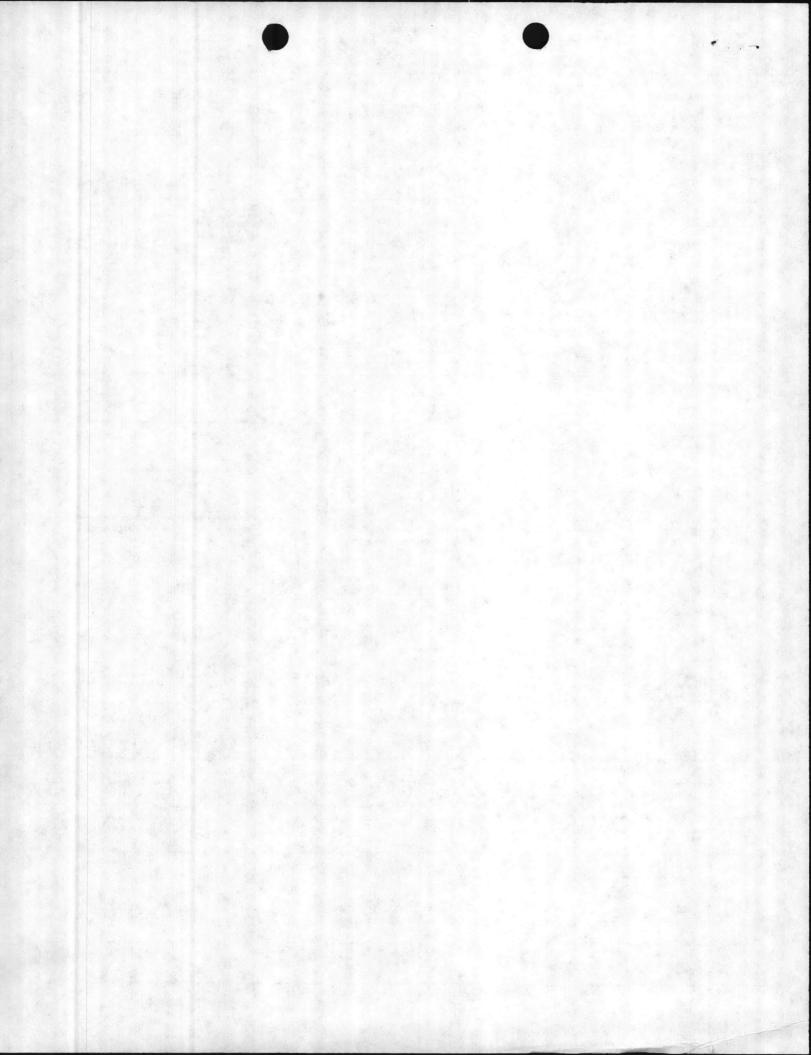
Item 15. Special Handling Instructions and Additional Information - Use this space to indicate special transportation, treatment, storage, or disposal information or Bill of Lading information. For international shipments, enter the point of departure (City and State).

- Item 16. Generator's Certification Read and sign by hand the certification statement. Enter the date the waste was shipped. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e,g., and rail) in the space below the certification statement. TRANSPORTER
- Item 17. Transporter 1 Acknowledgement of Receipt of Materials Print or type the name of the person accepting the waste on behalf of the transporter. Sign and enter the date of receipt.
- Item 18. Transporter 2 Acknowledgement of Receipt of Materials If applicable, see Item 17.

- Item 19. Discrepancy Indication Space The Designated Facility's authorized representative must note in this space any significant discrepancy between the waste described on the Manifest and the waste actually received.
- Item 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Print or type the name of the person accepting the waste on behalf of the owner or operator of the facility. Sign and enter the date of receipt.

SWM-51:REV. 6/87	a she a set. Y	Bureau of W P. O Harrisb	OF ENVIRONMEN /aste Management . Box 2063 urg, PA 17120 med for use on elite (12					Form approved. OMB No. 2050-003 Expires 9-30-88
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B. Generator's Name and Mailing Add New River Air Sta Camp LEJuene, NC	ation ZMarine 28542	Corps B	ase .		P	te Manifest Doc AB 46 te Gen. ID	3202	5 5
4. Generator's Phone (919) 5. Transporter 1 Company Name	-	6.	US EPA ID Num	ber Gultz /	C. Sta	te Trans. ID		
6110000 CO. 7. Transporter 2 Company Name	PORATIE.	8.	US EPA ID Num	ber	the second se	A-AH	a ()	
9. Designated Facility Name and Site DISOUS CORPO	rATIO ~	10.	US EPA ID Numb	IT THE INCOMES AND ADDRESS OF TAXABLE	P/	te Trans. ID A-AH		18-178
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11. US DOT Description (Including P	Proper Shipping Name, H	lazard Class, e	and ID Number)	12. Cont No.	ainers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
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In case of an emergency or spill immediately call the National Response Center (800) 424-8802 and the PA DER (717) 787-4343



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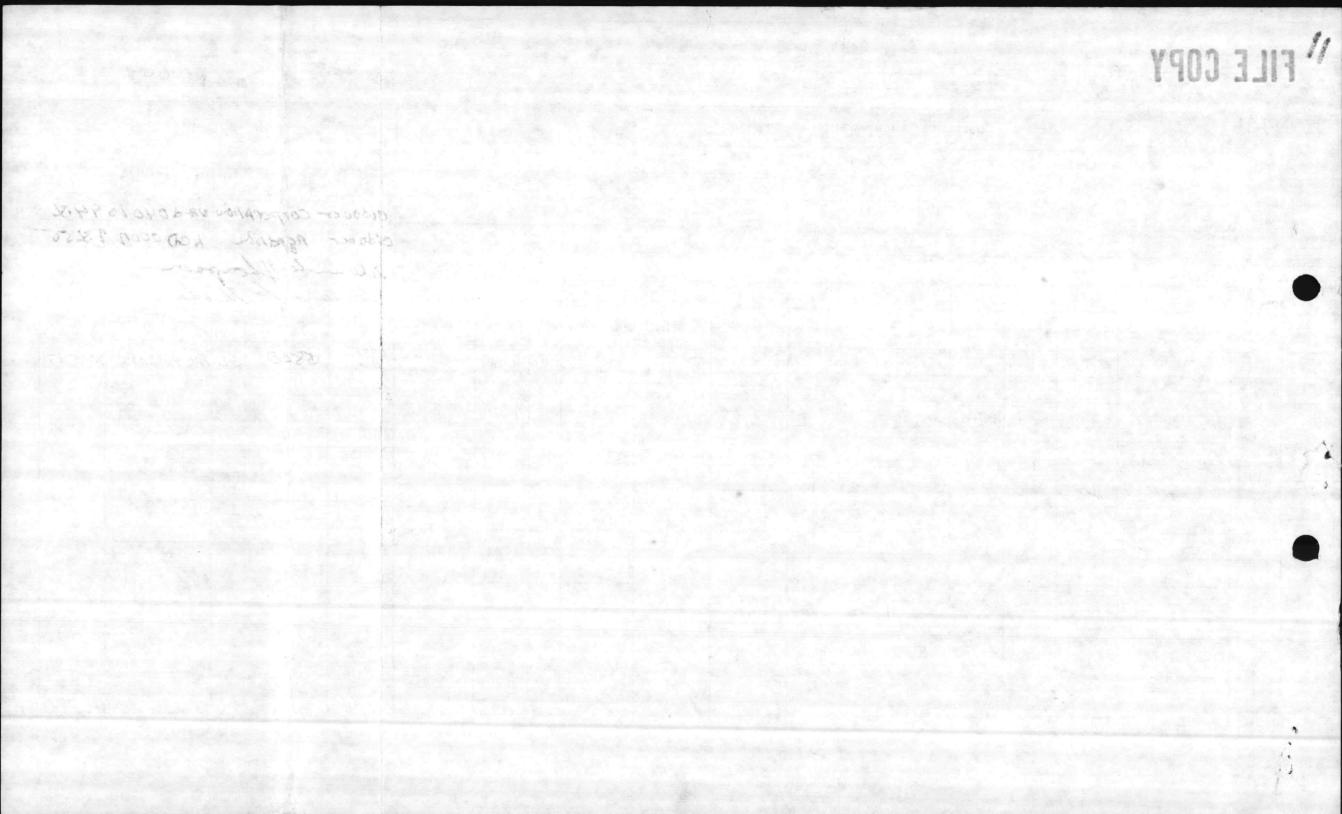
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INSTRUCTIONS FOR COMPLETION OF THE PA HAZARDOUS ASTE MANIFEST

Please read these instructions before completing this form

GENERAL INFORMATION

This Hazardous Waste Manifest consists of eight copies. As the Manifest is completed the copies are removed from back to front.

For interstate shipments, the copies of the manifest shall be distributed as indicated at the bottom of each copy.

For shipments within Pennsylvania, the Generator shall retain Copies 3, 4, and 8. The TSD Facility shall retain Copies 1, 2, and 6.

If there are more than four different waste streams in a shipment, except for lab packs, complete another Manifest. If there are more than two transporters or if the waste is a lab pack, use the Uniform Hazardous Waste Manifest Continuation Sheet. Continuation Sheets may be purchased commercially. If you have any questions concerning the completion of this Manifest, call 717-787-6239.

NOTE: For interstate shipments you may be required to supply additional information regarding the completion of lettered Items A through K. Please check with both the Generator and Destination States for specific requirements.

GENERATOR

- Item 1. Generator's US EPA ID No. Enter the twelve digit US EPA Identification Number. Manifest Document No. The generator must assign a unique five digit number.
- Item 2. Page 1 of __ Enter the total number of pages used to complete this Manifest including the first page plus the number of Continuation Sheets, if any.

Item 3. Generator's Name and Mailing Address - Enter the complete name of the generator and the complete mailing address. The address should be the location that will manage the returned Manifest forms.

Item A. State Manifest Document Number - This Number is preprinted; do not alter it. This Number must be placed in item L of each continuation sheet.

Item B. State Gen. ID - Not required for PA Generators. See Note (above).

Item 4. Generator's Phone Number - Enter the area code and telephone number where an authorized agent of the Generator may be contacted.

Item 5. Transporter 1 Company Name - Enter the complete company name of the first transporter who will transport the waste.

Item 6. US EPA ID Number - Enter the twelve digit US EPA Identification Number of the transporter identified in Item 5.

Item C. State Trans. ID - Enter the Hazardous Waste Transporter License No. issued by PA Dept. of Environmental Resources. See Note (above).

Item D. Transporter's Phone - Enter the area code and telephone number where an authorized agent of the Transporter may be contacted.

Item 7. Transporter 2 Company Name - If applicable, see Item 5.

Item 8. US EPA ID Number - If applicable, see Item 6.

Item E. State Trans. ID - If applicable, see Item C.

Item F. Transporter's Phone - If applicable, see Item D.

Item 9. Designated Facility Name and Site Address - Enter the complete company name and complete site address of the facility designated to receive the waste listed on this Manifest. The address must be the site address, which may differ from the mailing address.

Item 10. US EPA ID Number - Enter the twelve digit US EPA Identification Number of the Designated Facility.

Item G. State Facility's ID - Not Required.

Item H. Facility's Phone - Enter the area code and phone number where an authorized agent of the Designated Facility may be contacted.

Item 11. US DOT Description [Including Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number)] - Enter the US DOT Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number) for each waste as identified in 49 CFR 171 through 177.

Item 12. Containers (No. and Type) - Enter the number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

Item 13. Total Quantity - Enter the total quantity of each waste. Do not use decimals or fractions.

Item 14. Unit (Wt/Vol) - Enter the appropriate abbreviation from Table II (below) for the unit of measure

item 14. Onic (vvi) voi) - Lince th	e appropriate appreviation norn rapie in (perow) it	or the unit of measure.	and the second sec
Table I – Types	of Containers	Table II - Unit	s of Measure
DM = Metal drums, barrels, kegs	DT = Dump truck	G = Gallons (liquids only)	L = Liters (liquids only)
DW = Wooden drums, barrels, kegs	CY = Cylinders	P =Pounds	K = Kilograms
DF = Fiberboard or plastic drums,	CM = Metal boxes, cartons, cases	T = Tons (2000 lbs)	M = Metric tons (1000 kg)
barrels, kegs	(including roll-offs)	Y = Cubic yards	N = Cubic meters
TP = Tanks portable	CW = Wooden boxes, cartons, cases		a state of the state of the
TT = Cargo tanks (tank trucks)	CF = Fiber or plastic boxes, cartons, cases	No. at the set of the	AND A STATE OF AN
TC = Tank cars	BA = Burlap, cloth, paper or plastic bags		

Item I. Waste No. - Enter the Hazardous Waste No. of the waste or wastes. Refer to Section 75.261 of the Department's Regulations. See Note (above). If a waste is not hazardous in PA but regulated by another State, enter that State's waste code. Also, enter in Item J, "This waste is not a hazardous waste according to PA law."

Item J. Additional Descriptions for Materials Listed Above (include physical state and hazard code) - Enter the physical state of each waste (S-solid, L-liquid, SL-sludge or G-gas) and the hazard code or codes that correspond to the Hazardous Waste No. (I-ignitable, C-corrosive, R-reactive, E-EP toxic, H-acute hazardous, and T-toxic). See Note (above).

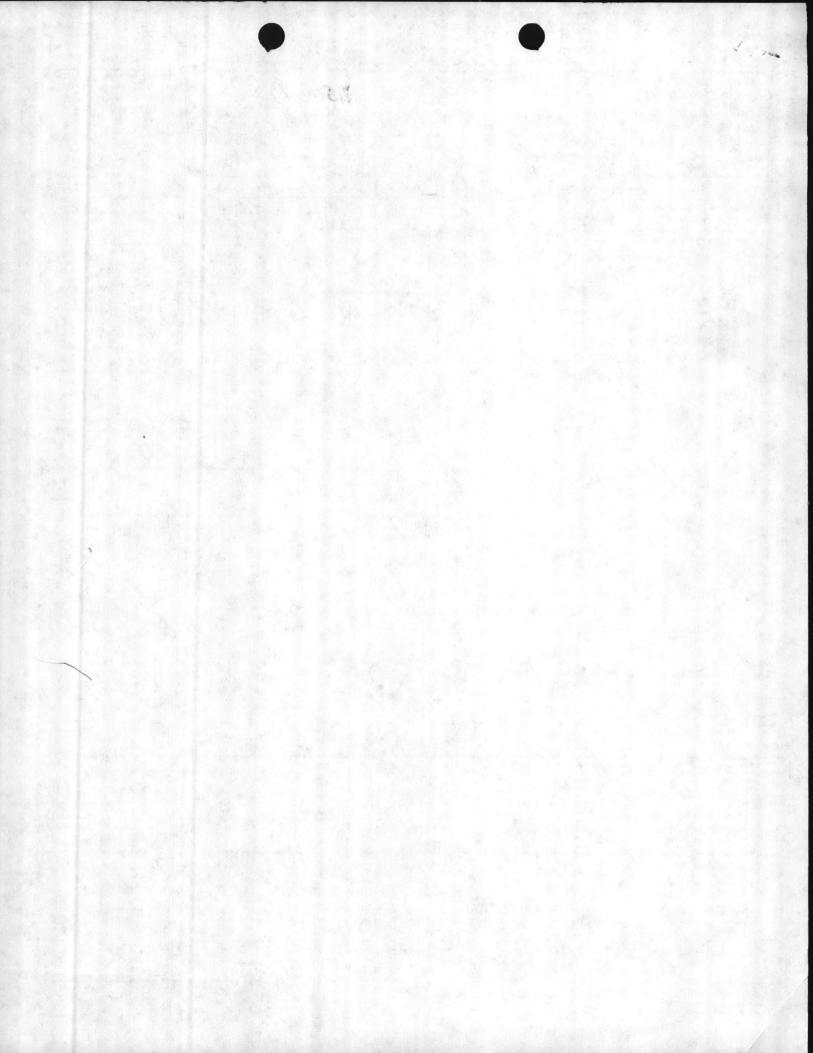
Item K. Handling Codes for Wastes Listed Above - Not required for PA Generators. See Note (above).

Item 15. Special Handling Instructions and Additional Information - Use this space to indicate special transportation, treatment, storage, or disposal information or Bill of Lading information. For international shipments, enter the point of departure (City and State).

- Item 16. Generator's Certification Read and sign by hand the certification statement. Enter the date the waste was shipped. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e,g., and rail) in the space below the certification statement. **TRANSPORTER**
- Item 17. Transporter 1 Acknowledgement of Receipt of Materials Print or type the name of the person accepting the waste on behalf of the transporter. Sign and enter the date of receipt.
 - Item 18. Transporter 2 Acknowledgement of Receipt of Materials If applicable, see Item 17.

- Item 19. Discrepancy Indication Space The Designated Facility's authorized representative must note in this space any significant discrepancy between the waste described on the Manifest and the waste actually received.
- Item 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Print or type the name of the person accepting the waste on behalf of the owner or operator of the facility. Sign and enter the date of receipt.

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5.	DIDOVER CORPORATION	1V.A.D.C	SEPA ID Number	9.43.6	PA	AH			
L	. Transporter 2 Company Name	8. U	S EPA ID Numb		E. State	aporter's Phon Trans. ID	. 18071	198-1	140
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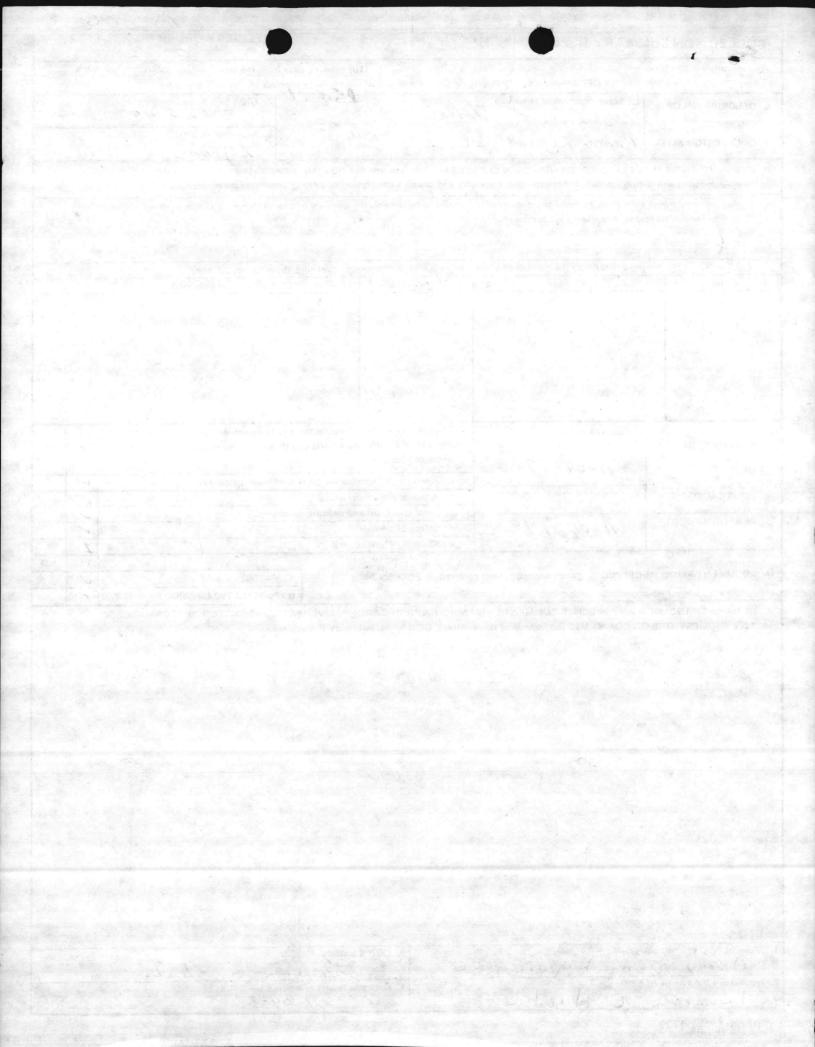
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2. Please fill in the co	plumns describing the number of	containers requiring overpacking, rep	acking, draining, etc., if any.	1.000 m	
CLIN	ITEMS	QUANTITY	REMARKS		
	1. Date of contractor arrival		factory) or U (unsatisfactory) for each phase of		
C. EVALUATION	11-04-87	encountered, if any.	and specify any problems and/or positive actions	S	U
CONTRACTOR'S	2. Date of contractor departu	a. Adequacy of Contractor		5	-
CONTRACTORS		b. Adequacy of repackagin c. Final clean-up and deco		V	+
PERFORMANCE	11-04-87	d. Safety of personnel		V	-
		e. Number of trucks used		1	199
		the second second		YES	NC
D. DOCUMENTATION F	Check each docu	ment received by PDO for filing	a. Manifest b. Form DD 250 (or DPDS Form 1697)	V	-
) this contract, COR letter, Summary			
Name of PDO submittin	amp Lycane	, N.C. 4. Date this repo	men 6. Shut		
Formance	E. Hunter		11-04-87		

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UNIFORM HAZARDOUS WASTE MANIFEST	1. Genera	ator's US EP/	A ID No. Do	Manifest cument No.	2. Pag of 1		uired by Fe	
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In case of an emergency or spill immediately call the National Response Center (800) 424-8802 and the PA DER (717) 787-4343

INSTRUCTIONS FOR COMPLETION OF THE PA HAZARDOUS ASTE MANIFEST

-Please read these instructions before completing this form-

GENERAL INFORMATION

This Hazardous Waste Manifest consists of eight copies. As the Manifest is completed the copies are removed from back to front. For interstate shipments, the copies of the manifest shall be distributed as indicated at the bottom of each copy.

For interstate simplifients, the copies of the mannest shall be distributed as indicated at the bottom of each copy.

For shipments within Pennsylvania, the Generator shall retain Copies 3, 4, and 8. The TSD Facility shall retain Copies 1, 2, and 6. If there are more than four different waste streams in a shipment, except for lab packs, complete another Manifest. If there are more than two transporters or if the waste is a lab pack, use the Uniform Hazardous Waste Manifest Continuation Sheet. Continuation Sheets may be purchased commercially. If you have any questions concerning the completion of this Manifest, call 717-787-6239.

NOTE: For interstate shipments you may be required to supply additional information regarding the completion of lettered Items A through K. Please check with both the Generator and Destination States for specific requirements.

GENERATOR

Item 1.	Generator's US EPA ID No.	- Enter the twelve digit US EPA Identification Number. Manifest Document No The generator must assign a unique	
	five digit number.	and the second	

Page 1 of ____ - Enter the total number of pages used to complete this Manifest including the first page plus the number of Continuation Sheets, if any.
 Generator's Name and Mailing Address - Enter the complete name of the generator and the complete mailing address. The address should be the location that will manage the returned Manifest forms.

Item A. State Manifest Document Number - This Number is preprinted; do not alter it. This Number must be placed in item L of each continuation sheet.

Item B. State Gen. ID - Not required for PA Generators. See Note (above).

Item 4. Generator's Phone Number - Enter the area code and telephone number where an authorized agent of the Generator may be contacted.

Item 5. Transporter 1 Company Name - Enter the complete company name of the first transporter who will transport the waste.

Item 6. US EPA ID Number - Enter the twelve digit US EPA Identification Number of the transporter identified in Item 5.

Item C. State Trans, ID - Enter the Hazardous Waste Transporter License No. issued by PA Dept. of Environmental Resources. See Note (above).

Item D. Transporter's Phone - Enter the area code and telephone number where an authorized agent of the Transporter may be contacted.

Item 7. Transporter 2 Company Name - If applicable, see Item 5.

Item 8. US EPA ID Number - If applicable, see Item 6.

Item E. State Trans. ID - If applicable, see Item C.

- Item F. Transporter's Phone If applicable, see Item D.
- Item 9. Designated Facility Name and Site Address Enter the complete company name and complete site address of the facility designated to receive the waste listed on this Manifest. The address must be the site address, which may differ from the mailing address.

Item 10. US EPA ID Number - Enter the twelve digit US EPA Identification Number of the Designated Facility.

Item G. State Facility's ID - Not Required.

Item H. Facility's Phone - Enter the area code and phone number where an authorized agent of the Designated Facility may be contacted.

- Item 11. US DOT Description [Including Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number)] Enter the US DOT Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number) for each waste as identified in 49 CFR 171 through 177.
- Item 12. Containers (No. and Type) Enter the number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

Item 13. Total Quantity - Enter the total quantity of each waste. Do not use decimals or fractions.

Item 14. Unit (Wt/Vol) - Enter the appropriate abbreviation from Table II (below) for the unit of measure.

Table I — Types of	Containers	Table II – Un	nits of Measure
DM = Metal drums, barrels, kegs	DT = Dump truck	G = Gallons (liquids only)	L = Liters (liquids only)
DW = Wooden drums, barrels, kegs	CY = Cylinders	P = Pounds	K = Kilograms
DF = Fiberboard or plastic drums,	CM = Metal boxes, cartons, cases	T = Tons (2000 lbs)	M = Metric tons (1000 kg)
barrels, kegs	(including roll-offs)	Y = Cubic yards	N = Cubic meters
TP = Tanks portable	CW = Wooden boxes, cartons, cases		
TT = Cargo tanks (tank trucks)	CF = Fiber or plastic boxes, cartons, cases		

TC = Tank cars

BA = Burlap, cloth, paper or plastic bags

Item I. Waste No. - Enter the Hazardous Waste No. of the waste or wastes. Refer to Section 75.261 of the Department's Regulations. See Note (above). If a waste is not hazardous in PA but regulated by another State, enter that State's waste code. Also, enter in Item J, "This waste is not a hazardous waste according to PA law."

Item J. Additional Descriptions for Materials Listed Above (include physical state and hazard code) - Enter the physical state of each waste (S-solid, L-liquid, SL-sludge or G-gas) and the hazard code or codes that correspond to the Hazardous Waste No. (I-ignitable, C-corrosive, R-reactive, E-EP toxic, H-acute hazardous, and T-toxic). See Note (above).

Item K. Handling Codes for Wastes Listed Above - Not required for PA Generators. See Note (above).

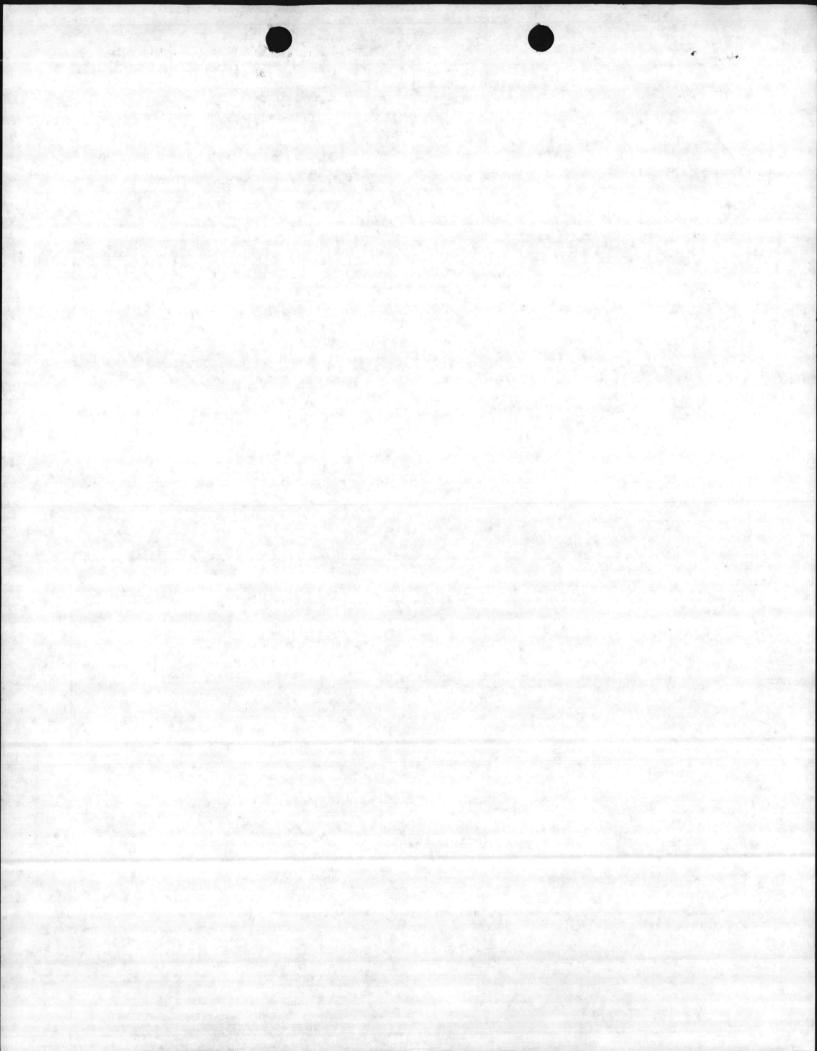
- Item 15. Special Handling Instructions and Additional Information Use this space to indicate special transportation, treatment, storage, or disposal information or Bill of Lading information. For international shipments, enter the point of departure (City and State).
- Item 16. Generator's Certification Read and sign by hand the certification statement. Enter the date the waste was shipped. If a mode other than highway is used, the word ''highway'' should be lined out and the appropriate mode (rail, water, or air) inserted in the space below. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g., and rail) in the space below the certification statement.

TRANSPORTER

- Item 17. Transporter 1 Acknowledgement of Receipt of Materials Print or type the name of the person accepting the waste on behalf of the transporter. Sign and enter the date of receipt.
- Item 18. Transporter 2 Acknowledgement of Receipt of Materials If applicable, see Item 17.

- Item 19. Discrepancy Indication Space The Designated Facility's authorized representative must note in this space any significant discrepancy between the waste described on the Manifest and the waste actually received.
- Item 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Print or type the name of the person accepting the waste on behalf of the owner or operator of the facility. Sign and enter the date of receipt.

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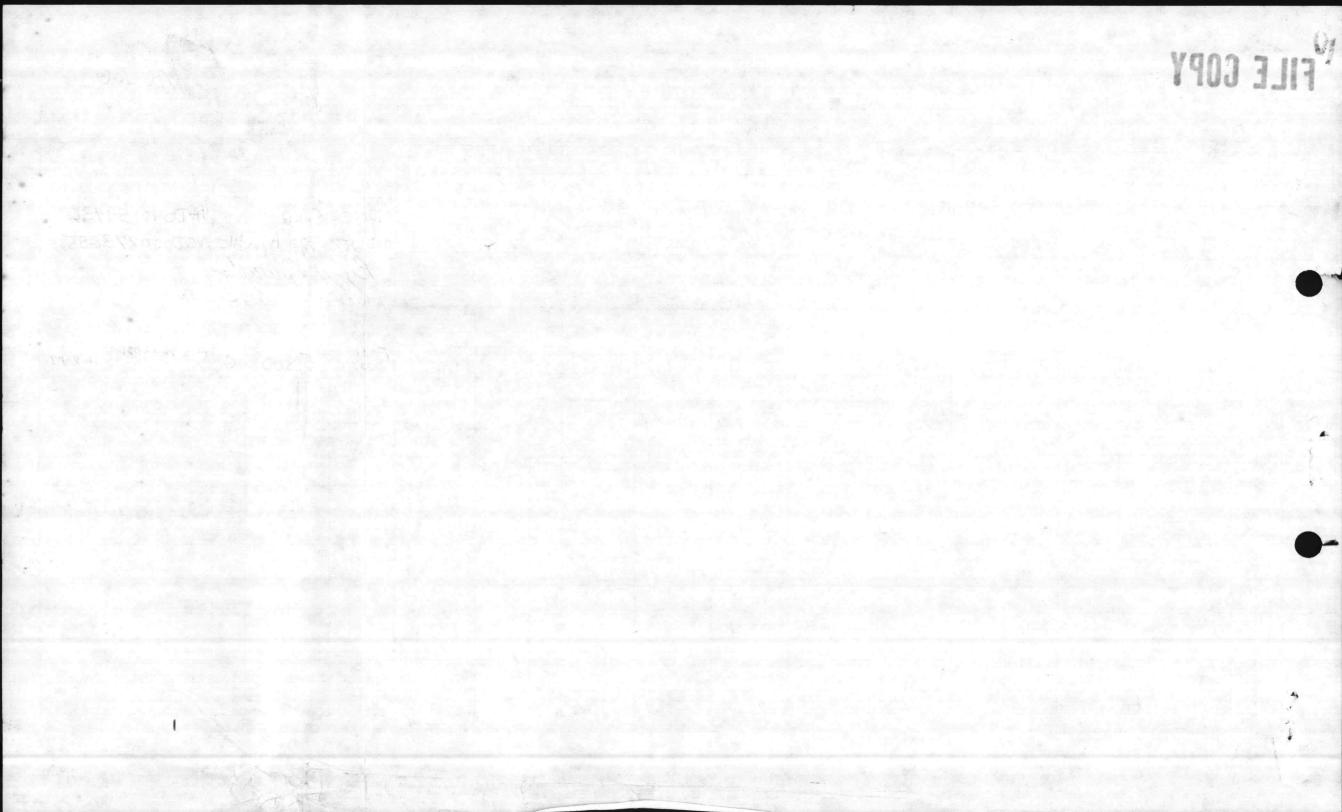
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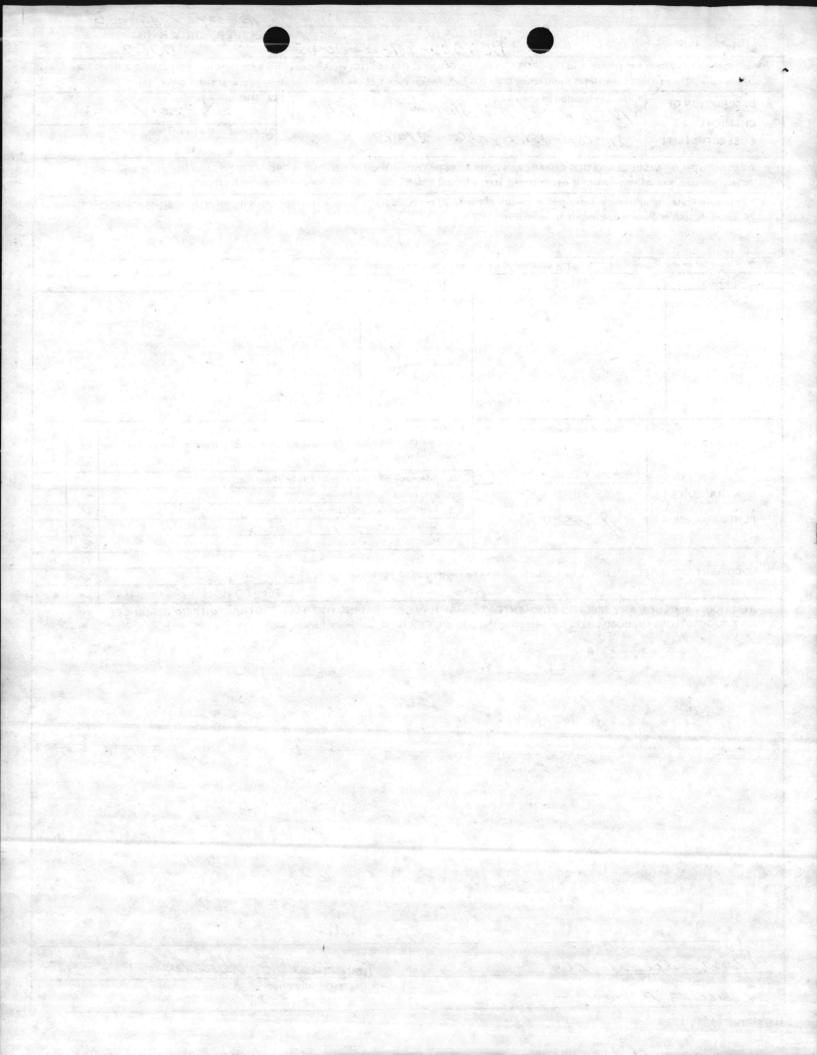
HQ DRMS Form 1786 (Previous edition to be used until exhausted)

(SEE REVERSE FOR ADDITIONAL REMARKS IF APPLICABLE)

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COLLECTION	DESCRIPTION OF CHEMICAL COLLECTION SITE If Ew Ruiter Arive Startions Tonk 4 Ji JACLSon Urlls, NC 2P549 J DESCRIPTION OF MISCELLANEOUS CHEMICALS COLLECTED. (Attach copy of DD-250 or DPD to your contract and delivery order. If not provided, state why and attach a description or copy of annot to your contract and delivery order. If not provided, state why and attach a description or copy of annot to your contract and delivery order. If not provided, state why and attach a description or copy of annot to your contract and delivery order. If not provided, state why and attach a description or copy of annot to your contract and delivery order. If not provided, state why and attach a description or copy of annot to your contract and delivery order. If not provided, state why and attach a description or copy of annot to your contract and delivery order. If not provided, state why and attach a description or copy of annot to your contract and delivery order. If not provided, state why and attach a description or copy of annot to your contract and delivery order. If not provided, state why and attach a description or copy of annot to react and delivery of contractor generics. 2. Please fill in the columns descripting the number of containers requiring overpacking, repacking, repacking, drain CLIN 3. Please check either S (satisfactory) or U contractor's performance and specify ar encountered, if any. 0F 0F 0. Date of contractor departure a. Adequacy of repackaging 0. Final clean-up and decontamination d. Safety of personnel c. Final clean-up and decontamination d. Safety of personnel 0CUMENTATION RECEIVED Check each document received by PDO for filing		AS -004 AS -00:	ALC NO.	Subjection States
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C EVALUATION	1. Date of contractor arrival				1.00
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OF		a Adequacy of Contractor	COB briefing/notification	V	-
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D. DOCUMENTATION			-	YES	N
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	YLVANIA DEPARTMENT OF ENVIRONME Bureau of Waste Management P. O. Box 2063 Harrisburg, PA 17120 e print or type. (Form designed for use on elite (C			Form approved. OMB No. 2050-0039 Expires 9-30-88
UNIFORM HAZARDOUS WASTE MANIFEST		Manifest Document No. 95004	2. Pa of	is not required but is required	red by Fe red by St	deral law
3. Generator's Name and Mailing Address New River Air Station Camp LEJeune NC 28542		n an	F	AB 463 te Gen. ID	204	10
4. Generator's Phone (919) 451 5. Transporter 1 Company Name	5613 	mber GG 421	C. Sta	AME ate Trans. ID		
7. Transporter 2 Company Name	8. US EPA ID Nu		D. Tra	A-AH · · · · · · · · · · · · · · · · · · ·	8%	778-778
9. Designated Facility Name and Site Address	ERL	0000 - 00 0000 - 00	P. F. Tra	A-AH	۰۰.) Not	Required
11. US DOT Description (Including Proper Shi	J 8 1 2 8 N.C. D. 0.0.7.	1. 3. 6. 3. 3 12. Cont No.	ECCN COLORS COLORS	cility's Phone (70 13. Total Quantity	14. Unit Wt/Vo	I. Waste No.
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classified, packed, marked, and labeled, and are If I am a large quantity generator, I certify that practicable and that I have selected the practica	I hereby declare that the contents of this consignment in all respects in proper condition for transport by highwa I have a program in place to reduce the volume and to able method of treatment, storage, or disposal currently tity generator, I have made a good faith effort to minimi	ay according to app exicity of waste ger available to me wh	licable int nerated to ich minim	the degree I have det izes the present and fu	I governm ermined t uture threa	o be economically at to human health
Printed/Typed Name Hunter, L.F.	Signature	n fe. p	lu tu	And A	Mo	nth Day Year .1 0.3 8.7
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			and and a	algul 1961.	Contraction of the	enger og hande

In case of an emergency or spill immediately call the National Response Center (800) 424-8802 and the PA DER (717) 787-4343

INSTRUCTIONS FOR COMPLETION OF THE PA HAZARDOW WASTE MANIFEST

-Please read these instructions before completing this form-

GENERAL INFORMATION

This Hazardous Waste Manifest consists of eight copies. As the Manifest is completed the copies are removed from back to front.

For interstate shipments, the copies of the manifest shall be distributed as indicated at the bottom of each copy.

- For shipments within Pennsylvania, the Generator shall retain Copies 3, 4, and 8. The TSD Facility shall retain Copies 1, 2, and 6.
- If there are more than four different waste streams in a shipment, except for lab packs, complete another Manifest. If there are more than two transporters or if the waste is a lab pack, use the Uniform Hazardous Waste Manifest Continuation Sheet. Continuation Sheets may be purchased commercially.
- If you have any questions concerning the completion of this Manifest, call 717-787-6239.
- NOTE: For interstate shipments you may be required to supply additional information regarding the completion of lettered Items A through K. Please check with both the Generator and Destination States for specific requirements.

GENERATOR

- Item 1. Generator's US EPA ID No. Enter the twelve digit US EPA Identification Number. Manifest Document No. The generator must assign a unique five digit number.
- Item 2. Page 1 of __ Enter the total number of pages used to complete this Manifest including the first page plus the number of Continuation Sheets, if any.
 Item 3. Generator's Name and Mailing Address Enter the complete name of the generator and the complete mailing address. The address should be the location that will manage the returned Manifest forms.
- Item A. State Manifest Document Number This Number is preprinted; do not alter it. This Number must be placed in item L of each continuation sheet.
- Item B. State Gen. ID Not required for PA Generators. See Note (above).
- Item 4. Generator's Phone Number Enter the area code and telephone number where an authorized agent of the Generator may be contacted.
- Item 5. Transporter 1 Company Name Enter the complete company name of the first transporter who will transport the waste.
- Item 6. US EPA ID Number Enter the twelve digit US EPA Identification Number of the transporter identified in Item 5.
- Item C. State Trans. ID Enter the Hazardous Waste Transporter License No. issued by PA Dept. of Environmental Resources. See Note (above).
- Item D. Transporter's Phone Enter the area code and telephone number where an authorized agent of the Transporter may be contacted.
- Item 7. Transporter 2 Company Name If applicable, see Item 5.
- Item 8. US EPA ID Number If applicable, see Item 6.
- Item E. State Trans. ID If applicable; see Item C.
- Item F. Transporter's Phone If applicable, see Item D.
- Item 9. Designated Facility Name and Site Address Enter the complete company name and complete site address of the facility designated to receive the waste listed on this Manifest. The address must be the site address, which may differ from the mailing address.
- Item 10. US EPA ID Number Enter the twelve digit US EPA Identification Number of the Designated Facility.
- Item G. State Facility's ID Not Required.
- Item H. Facility's Phone Enter the area code and phone number where an authorized agent of the Designated Facility may be contacted.
- Item 11. US DOT Description [Including Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number)] Enter the US DOT Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number) for each waste as identified in 49 CFR 171 through 177.
- Item 12. Containers (No. and Type) Enter the number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.
- Item 13. Total Quantity Enter the total quantity of each waste. Do not use decimals or fractions.
- Item 14. Unit (Wt/Vol) Enter the appropriate abbreviation from Table II (below) for the unit of measure.

Table I. – Types of	of Containers	Table II - Un	its of Measure
DM = Metal drums, barrels, kegs	DT = Dump truck	G = Gallons (liquids only)	L=Liters (liquids only)
DW = Wooden drums, barrels, kegs	CY = Cylinders	P = Pounds	K = Kilograms
DF = Fiberboard or plastic drums,	CM = Metal boxes, cartons, cases	T = Tons (2000 lbs)	M = Metric tons (1000 kg)
barrels, kegs	(including roll-offs)	Y = Cubic yards	N = Cubic meters
TP = Tanks portable	CW = Wooden boxes, cartons, cases	en general estimation per	the second s
TT = Cargo tanks (tank trucks)	CE = Fiber or plastic boxes cartons cases		

TC = Tank cars

BA = Burlap, cloth, paper or plastic bags

Item I. Waste No. - Enter the Hazardous Waste No. of the waste or wastes. Refer to Section 75.261 of the Department's Regulations. See Note (above). If a waste is not hazardous in PA but regulated by another State, enter that State's waste code. Also, enter in Item J, "This waste is not a hazardous waste according to PA law."

- Item J. Additional Descriptions for Materials Listed Above (include physical state and hazard code) Enter the physical state of each waste (S-solid, L-liquid, SL-sludge or G-gas) and the hazard code or codes that correspond to the Hazardous Waste No. (I-ignitable, C-corrosive, R-reactive, E-EP toxic, H-acute hazardous, and T-toxic). See Note (above).
- Item K. Handling Codes for Wastes Listed Above Not required for PA Generators. See Note (above).
- Item 15. Special Handling Instructions and Additional Information Use this space to indicate special transportation, treatment, storage, or disposal information or Bill of Lading information. For international shipments, enter the point of departure (City and State).
- Item 16. Generator's Certification Read and sign by hand the certification statement. Enter the date the waste was shipped. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g., and rail) in the space below the certification statement.
- TRANSPORTER
- Item 17. Transporter 1 Acknowledgement of Receipt of Materials Print or type the name of the person accepting the waste on behalf of the transporter. Sign and enter the date of receipt.
- Item 18. Transporter 2 Acknowledgement of Receipt of Materials If applicable, see Item 17.

- Item 19. Discrepancy Indication Space The Designated Facility's authorized representative must note in this space any significant discrepancy between the waste described on the Manifest and the waste actually received.
- Item 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Print or type the name of the person accepting the waste on behalf of the owner or operator of the facility. Sign and enter the date of receipt.

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INSTRUCTIONS FOR COMPLETION OF THE PA HAZARD WASTE MANIFEST

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GENERATOR

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- Item 5. Transporter 1 Company Name Enter the complete company name of the first transporter who will transport the waste.

Item 6. US EPA ID Number - Enter the twelve digit US EPA Identification Number of the transporter identified in Item 5.

- Item C. State Trans. ID Enter the Hazardous Waste Transporter License No. issued by PA Dept. of Environmental Resources. See Note (above).
- Item D. Transporter's Phone Enter the area code and telephone number where an authorized agent of the Transporter may be contacted.
- Item 7. Transporter 2 Company Name If applicable, see Item 5.
- Item 8. US EPA ID Number If applicable, see Item 6.
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- Item 10. US EPA ID Number Enter the twelve digit US EPA Identification Number of the Designated Facility.
- Item G. State Facility's ID Not Required.
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- Item 14. Unit (Wt/Vol) Enter the appropriate abbreviation from Table II (below) for the unit of measure.

Table I — Type	s of Containers	Table II — U	nits of Measure
DM = Metal drums, barrels, kegs	DT = Dump truck	G = Gallons (liquids only)	 L = Liters (liquids only)
DW = Wooden drums, barrels, kegs	CY = Cylinders	P = Pounds	K = Kilograms
DF = Fiberboard or plastic drums,	CM = Metal boxes, cartons, cases	T = Tons (2000 lbs)	M = Metric tons (1000 kg)
barrels, kegs	(including roll-offs)	Y = Cubic yards	N = Cubic meters
TP = Tanks portable	CW = Wooden boxes, cartons, cases		and the second
TT = Cargo tanks (tank trucks)	CF = Fiber or plastic boxes, cartons cases		and the second

TC = Tank cars

BA = Burlap, cloth, paper or plastic bags

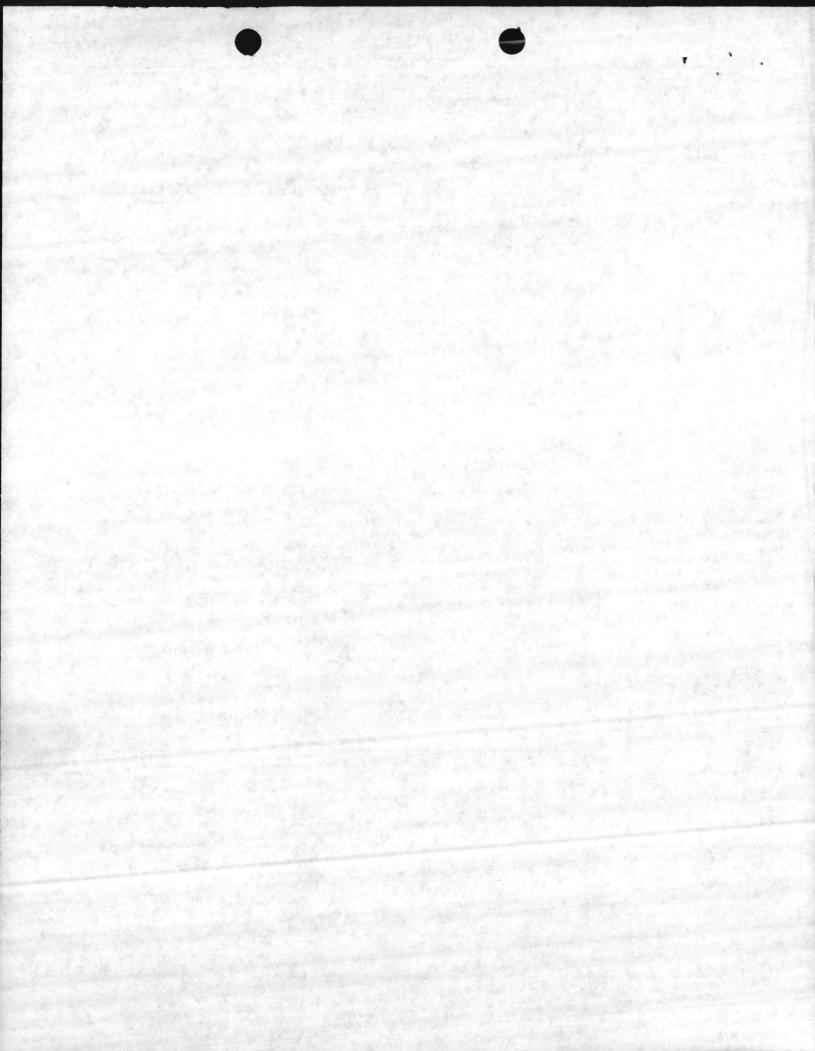
- Item I. Waste No. Enter the Hazardous Waste No. of the waste or wastes. Refer to Section 75.261 of the Department's Regulations. See Note (above). If a waste is not hazardous in PA but regulated by another State, enter that State's waste code. Also, enter in Item J, "This waste is not a hazardous waste according to PA law."
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TRANSPORTER

- Item 17. Transporter 1 Acknowledgement of Receipt of Materials Print or type the name of the person accepting the waste on behalf of the transporter. Sign and enter the date of receipt.
- Item 18. Transporter 2 Acknowledgement of Receipt of Materials If applicable, see Item 17.

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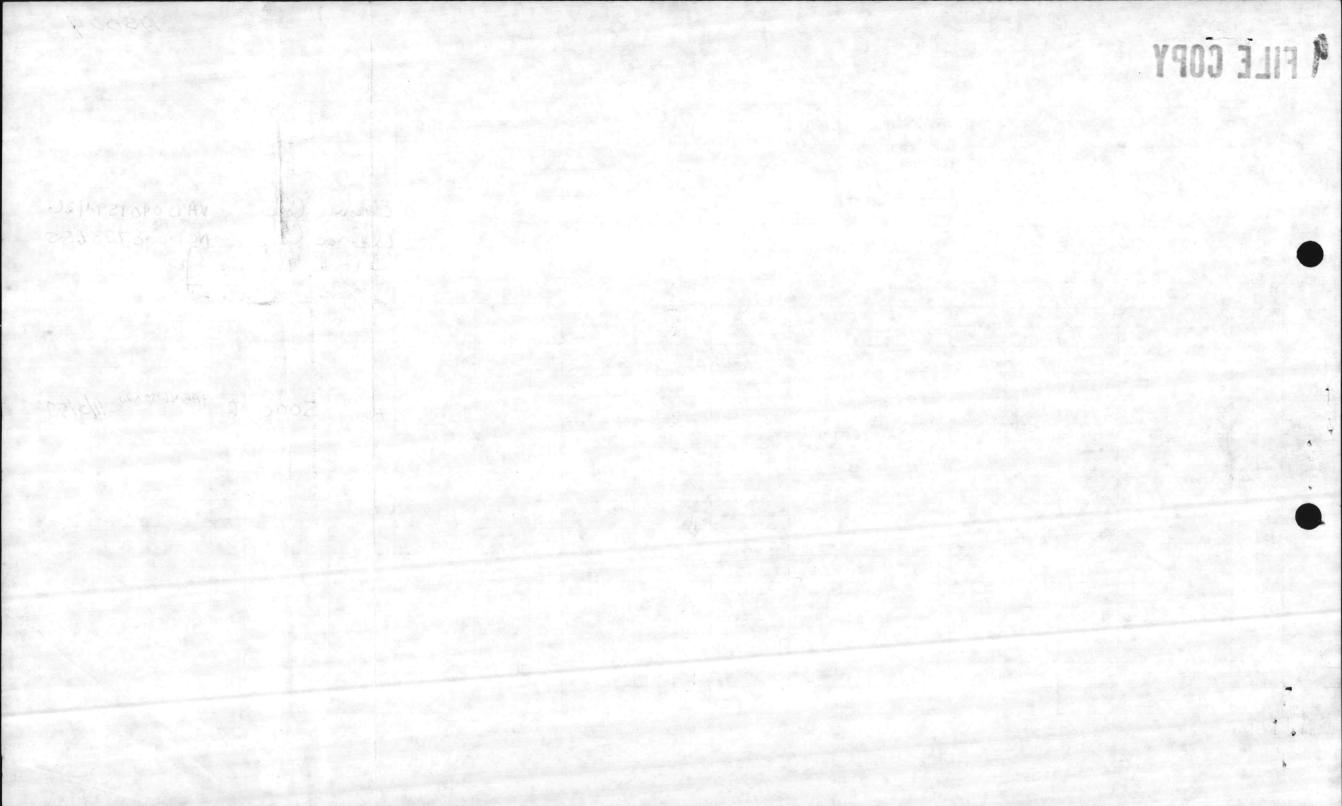
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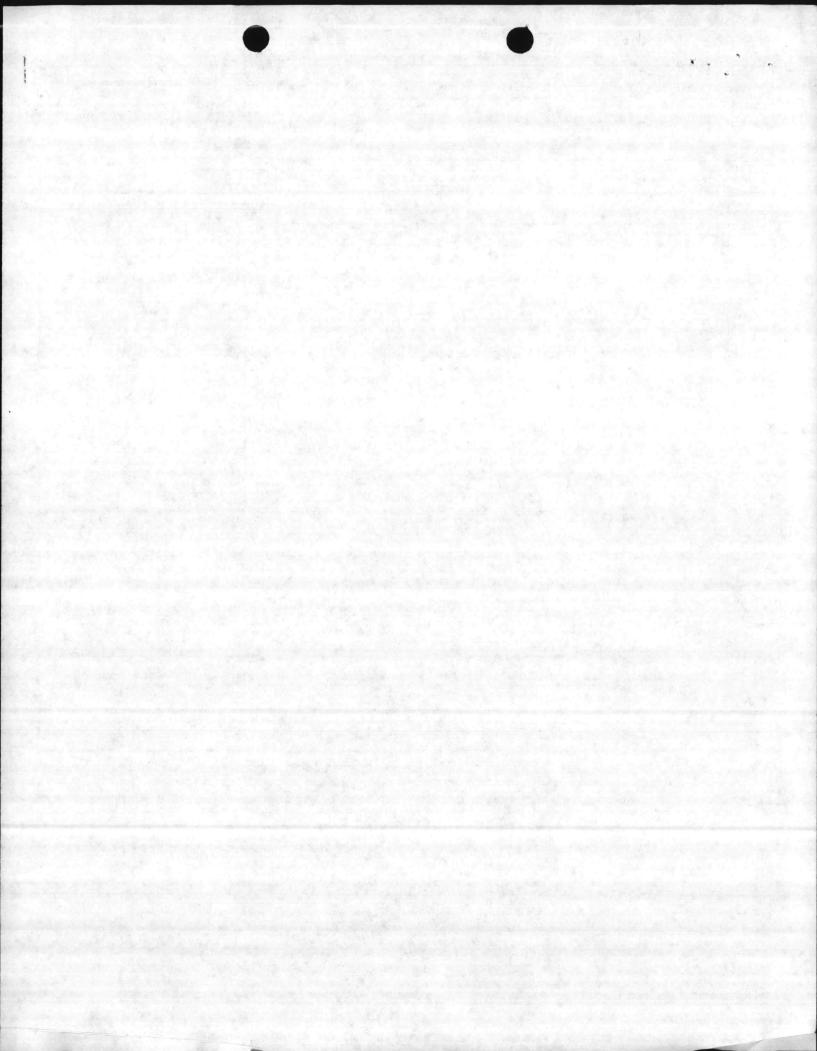
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WM-51:REV. 6/97 Please p		P. O. Box 2063 Harrisburg, PA 17120 m designed for use on elite (12-p	oitch) typewr	iter.)			Form approved. OMB No. 2050-003 Expires 9-30-88
UNIFORM HAZARDOUS WASTE MANIFEST		S US EPA ID No.	Manifest ument No. 5005	2. Pag of	1 is not re but is re	tion in the sh equired by Fe equired by St	aderal law tate law.
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R+2 Aquedle Kd. Norwood, NC 26128		N.C.D.O.O.O.7.7.	3.6.5.5	and the second s	te Facility's ID lity's Phone (Required
11. US DOT Description (Including Proper Shipp	oing Name, Hezard	l Class, and ID Number)	12. Conta No.		13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
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PICKUP REPORT DELIVERY ORDER INVENTORY (NON PCB) AWARDED CONTRACT NUMBER NC 81700 22570 SHADED PORTIONS TO BE COMPLETED BY CONTRACTING OFFICE GENERATOR Marine Eaton Base 8045 0.1-ST-D- 0024.5 DELIVERY ORDER NUMBER DRMO COMPLETE ADDRESS References NC, 28542 10 Legene AUTHORIZED TRANSPORTER NAME EPA NUMBER Mell Rules air Atation VAD040159436 EPA NUMBER COR Oldover COMMERCIAL PHONE NUMBER GEN TOR REQUEST NUMBER GEN TOR REQUEST NUMBER Corp. TSDF NAME AUTOVON PHONE NUMBER Oldover Corp. NKD000773655 4-84 - 5613/ 5655 AUTHORIZED TRANSPORTER SIGNATURE RIC CODE STUA 4016 ICERS REPRESENTATIVE (COR) AUTHORIZED CONTRACTING OF DAYE RECEIVED BY CONTRACTING DATE SENT TO CONTRACTING 10-6-87 A PICKUP STORAGE. PICKED UP WASTE DATE DTID NSN ITEM NAME STORAGE QUANTITY UNIT PRICK AMOUNT PICKED UP LOCATION QUANTITY LINE CODE SUFFIX CODE UNIT CLIN DDMMYY DRUM NUMBER DODAAC DATE SERIAL LSN above dark 30,000 gl 9150 60 2.10 81,000,00 "Dartover 119318: 7274 0003 400000000 4742 00 44 PAB 4632051 Lark D001 F001 11/3/87 26 auto 2010 30,000 52 2.10 \$1,000.00 G 9150 00 6000 HA Waster sil M93182 7274 0004 Waster sil. 4747- 10 AB 1 12 2,000.0

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allocation and The st	rm and submit it to the DPDS Contrac	A 200-87-D-004 eting Officer within ten (10) working	g days from the time that the contractor leave	s the	Calculated
A COMPANY AND A	dress of the DPDS Contracting Officer 1. Actual location of chemicals	na n	ed contract and/or delivery order.		
DESCRIPTION OF	NEW RIVER AIRS	TATION MGB			
CHEMICAL	CAMPLEJEYNE N.	C. 28542	. Sy 2014 3. Accountable DPDO		Maturato
COLLECTION SITE	TANK 420		LETEUNE		
DESCRIPTION OF	MISCELLANEOUS CHEMICALS COL	LECTED. (Attach copy of DD-25	50 or DPDS-1697, Pickup Report, as applicab	la	roay made a
Wedge to a Descention of another street of the sector street and	delivery order. If not provided, state			_	
i, Please indicate an order, (attach ad	y differences between the quanity of c ditional documents as necessary)	chemicals collected and the quantity	/ of chemicals shown in the contract and/or de the contract and/or descent and/or	livery	
2. Ple: se fill in the c	olumns describing the number of cont	ainers requiring overpacking, repact	king, draining, etc., if any.		
CLIN	ITEMS	QUANTITY '	REMARKS		-
EVALUATION	1. Date of contractor arrival	3. Please check either S (satisfac contractor's performance and	tory) or U (unsatisfactory) for each phase of specify any problems and/or positive actions		ADUCTOR
OF	27 OCT 87	encountered, if any.		S	
	2. Date of contractor departure	a. Adequacy of Contractor/C b. Adequacy of repackaging	OR briefing/notification	-	1_
CONT ACTOR'S				-	1
CONTRACTOR'S			amination	-	+
CONTEACTOR'S		c. Final clean—up and decont d. Safety of personnel	amination	2	
	2701787	c. Final clean-up and decont	amination	シノ	
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PERFORMANCE	2701787	 c. Final clean—up and decont d. Safety of personnel 	amination a. Manifest	YES /	N
PERFORMANCE DOCUMENTATION	270CT87 RECEIVED Check each document	c. Final clean-up and decont d. Safety of personnel e. Number of trucks used received by PDO for filing U MAY HAVE REGARDING OVE	a. Manifest b. Form DD 250 (or DPDS Form 1697) RALL CONTRACTOR PERFORMANCE		6
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UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. N •C •8 •1 •7 • 20 0 •2 •2 •1	Manif	est it No.		is no		d by Fee	aded areas deral law		
3. Generator's Name and Mailing Address	alant when it is Branch	<u> </u>		A. St	ate Manifest					
New River Air Station ZM Camp LEJeune, NC 28542	arine corps Base	1968) prins Printer		B. Sta	AD 4 ate Gen. ID	03,	206	2		
4. Generator's Phone (919) 451 561			1-16	ESCHART IN COMPLETE	SAME			1		
5. Transporter 1 Company Name	n 1. P.A.D.D.8	A ID Number	:92		ate Trans. ID A-AH	0.1	.3.9		Del	
7. Transporter 2 Company Name		A ID Number	gente ter	Destination of the second s	ansporter's P	hone 6	1/51 0	82289	196	
9. Designated Facility Name and Site Address 10. US EPA ID Number					E. State Trans. ID PA-AH					
9. Designated Facility Name and Site Address 10. US EPA ID Number WITSTE CONVERSION 2869 SAND STONE PRIVE				F. Transporter's Phone Orst Page SHE						
	440 PAD08	5.6.905	.92	and the second se	ate Facility's cility's Phone	CONTRACTOR OF CONTRACTOR	A CONTRACTOR OF THE OWNER	Required	Contraction of the local distance	
11. US DOT Description (Including Proper Shipping	and the second second second	Se - 1	2. Conta		13. Tota	Sugar	14. Unit	I. Waste N		
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INSTRUCTIONS FOR COMPLETION OF THE PA HAZARDOUS V TE MANIFEST

-Please read these instructions before completing this form

GENERAL INFORMATION

This Hazardous Waste Manifest consists of eight copies. As the Manifest is completed the copies are removed from back to front.

STORE - SALARS

For interstate shipments, the copies of the manifest shall be distributed as indicated at the bottom of each copy.

For shipments within Pennsylvania, the Generator shall retain Copies 3, 4, and 8. The TSD Facility shall retain Copies 1, 2, and 6.

- If there are more than four different waste streams in a shipment, except for lab packs, complete another Manifest. If there are more than two transporters or if the waste is a lab pack, use the Uniform Hazardous Waste Manifest Continuation Sheet. Continuation Sheets may be purchased commercially. If you have any questions concerning the completion of this Manifest, call 717-787-6239.
- NOTE: For interstate shipments you may be required to supply additional information regarding the completion of lettered Items A through K. Please check Sec. with both the Generator and Destination States for specific requirements.

GENERATOR

- Item 1. Generator's US EPA ID No. - Enter the twelve digit US EPA Identification Number. Manifest Document No. - The generator must assign a unique five digit number.
- Item 2 Page 1 of ____Enter the total number of pages used to complete this Manifest including the first page plus the number of Continuation Sheets, if any. Item 3. Generator's Name and Mailing Address - Enter the complete name of the generator and the complete mailing address. The address should be the location that will manage the returned Manifest forms.
- Item A: State Manifest Document Number - This Number is preprinted; do not alter it. This Number must be placed in item L of each continuation sheet. Item B. State Gen. ID - Not required for PA Generators. See Note (above).
- Item 4.
- Generator's Phone Number Enter the area code and telephone number where an authorized agent of the Generator may be contacted.
- Item 5. Transporter 1 Company Name - Enter the complete company name of the first transporter who will transport the waste.
- Item 6. US EPA ID Number - Enter the twelve digit US EPA Identification Number of the transporter identified in Item 5.
- Item C. State Trans. ID - Enter the Hazardous Waste Transporter License No. issued by PA Dept, of Environmental Resources, See Note (above).
- Item D. Transporter's Phone - Enter the area code and telephone number where an authorized agent of the Transporter may be contacted.
- Transporter 2 Company Name If applicable, see Item 5. Item 7.
- Item 8. US EPA ID Number - If applicable, see Item 6.
- Item E. State Trans. ID - If applicable, see Item C.
- Item F. Transporter's Phone - If applicable, see Item D.
- Item 9. Designated Facility Name and Site Address - Enter the complete company name and complete site address of the facility designated to receive the waste listed on this Manifest. The address must be the site address, which may differ from the mailing address.
- Item 10. US EPA ID Number - Enter the twelve digit US EPA Identification Number of the Designated Facility.
- Item G. State Facility's ID - Not Required.
- Item H. Facility's Phone - Enter the area code and phone number where an authorized agent of the Designated Facility may be contacted.
- Item 11. US DOT Description [Including Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number)] - Enter the US DOT Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number) for each waste as identified in 49 CFR 171 through 177.
- Item 12. Containers (No. and Type) - Enter the number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.
- Total Quantity Enter the total quantity of each waste. Do not use decimals or fractions. Item 13.
- Item 14. Unit (Wt/Vol) Enter the appropriate abbreviation from Table II (below) for the unit of measure.
- Table I Types of Containers Table II - Units of Measure DM = Metal drums, barrels, kegs DT = Dump truck G = Gallons (liquids only) L = Liters (liquids only) DW = Wooden drums, barrels, kegs CY = Cylinders P = Pounds K = Kilograms DF = Fiberboard or plastic drums, CM = Metal boxes, cartons, cases T = Tons (2000 lbs)M = Metric tons (1000 kg) barrels, kegs (including roll-offs) Y = Cubic yards N = Cubic meters TP = Tanks portable CW = Wooden boxes, cartons, cases TT = Cargo tanks (tank trucks) CF = Fiber or plastic boxes, cartons, cases
- TC = Tank cars

BA = Burlap, cloth, paper or plastic bags

- Item I. Waste No. Enter the Hazardous Waste No. of the waste or wastes. Refer to Section 75.261 of the Department's Regulations. See Note (above). If a waste is not hazardous in PA but regulated by another State, enter that State's waste code. Also, enter in Item J, "This waste is not a hazardous waste according to PA law."
- Item J. Additional Descriptions for Materials Listed Above (include physical state and hazard code) - Enter the physical state of each waste (S-solid, L-liquid, SL-sludge or G-gas) and the hazard code or codes that correspond to the Hazardous Waste No. (I-ignitable, C-corrosive, R-reactive, E-EP toxic, H-acute hazardous, and T-toxic). See Note (above).
- Item K. Handling Codes for Wastes Listed Above - Not required for PA Generators. See Note (above).
- Item 15. Special Handling Instructions and Additional Information Use this space to indicate special transportation, treatment, storage, or disposal information or Bill of Lading information. For international shipments, enter the point of departure (City and State).
- Item 16. Generator's Certification Read and sign by hand the certification statement. Enter the date the waste was shipped. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e,g., and rail) in the space below the certification statement.

TRANSPORTER

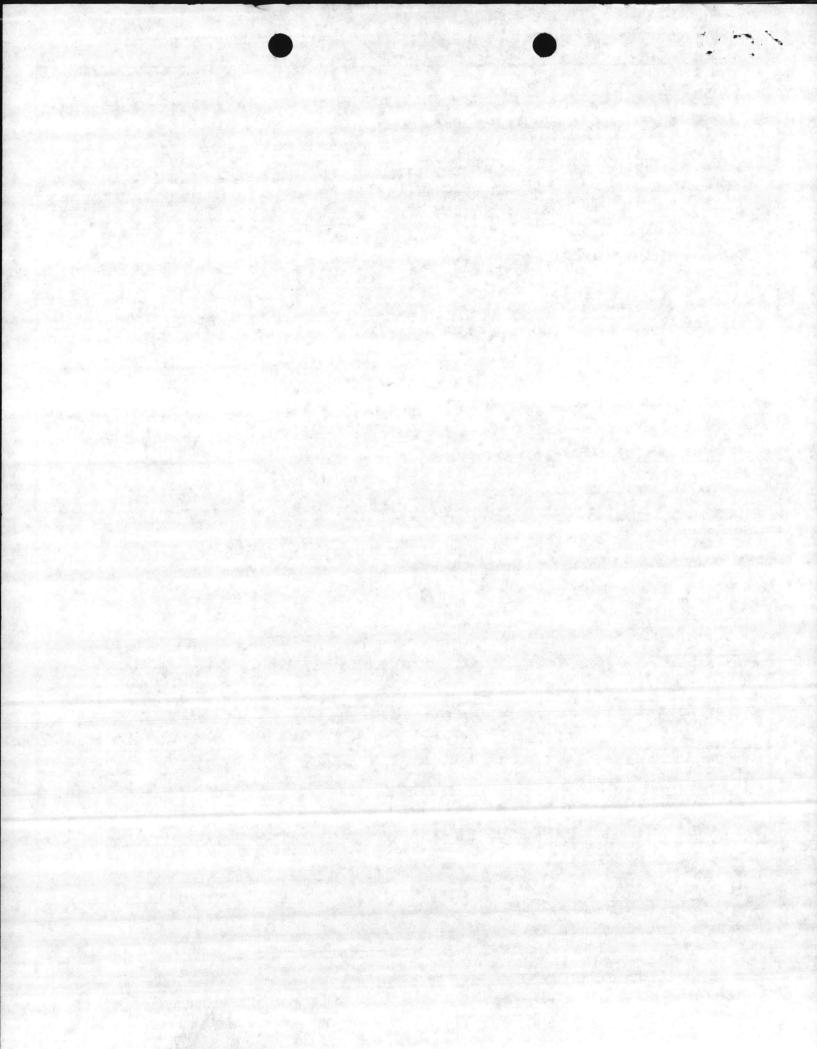
- Item 17. Transporter 1 Acknowledgement of Receipt of Materials Print or type the name of the person accepting the waste on behalf of the transporter. Sign and enter the date of receipt.
- Item 18. Transporter 2 Acknowledgement of Receipt of Materials If applicable, see Item 17.

DESIGNATED FACILITY

- Item 19. Discrepancy Indication Space The Designated Facility's authorized representative must note in this space any significant discrepancy between the waste described on the Manifest and the waste actually received.
- Item 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Print or type the name of the person accepting the waste on behalf of the owner or operator of the facility. Sign and enter the date of receipt.

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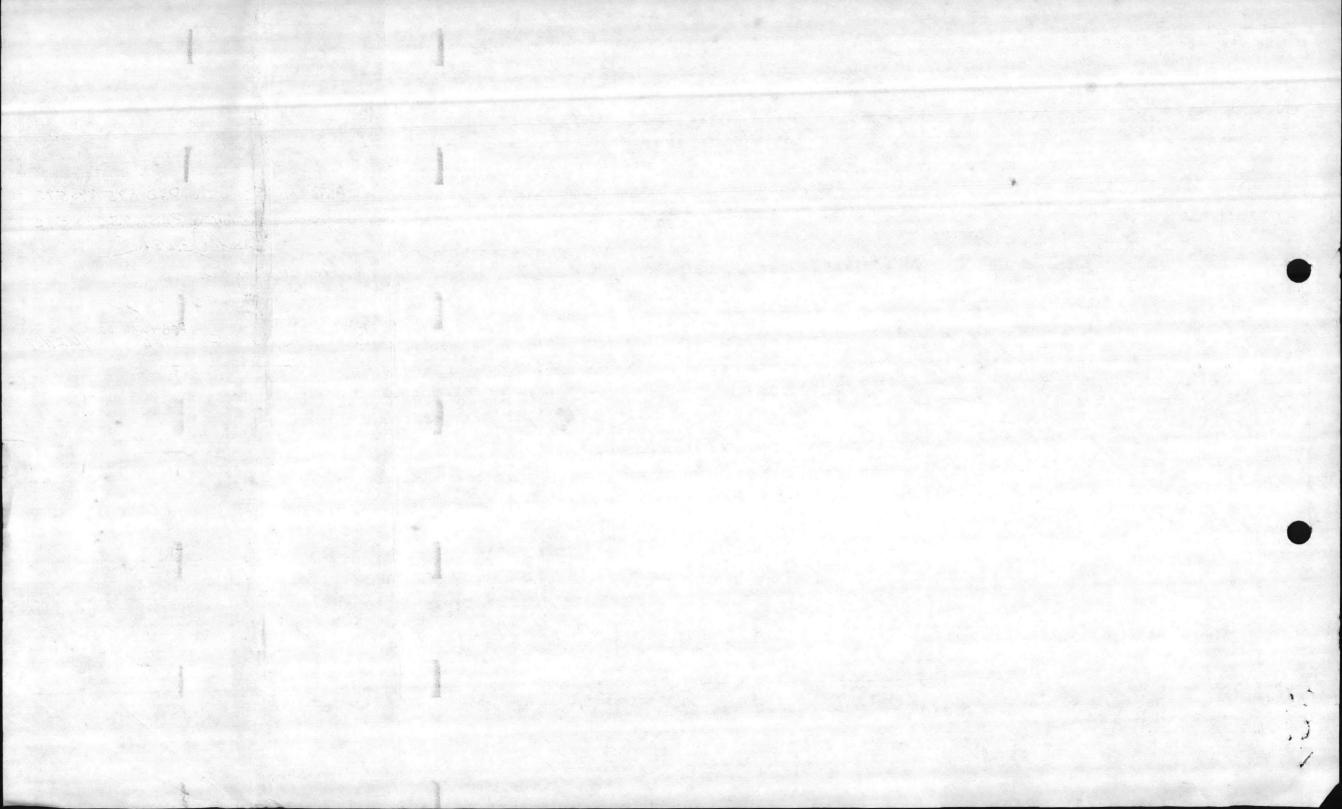
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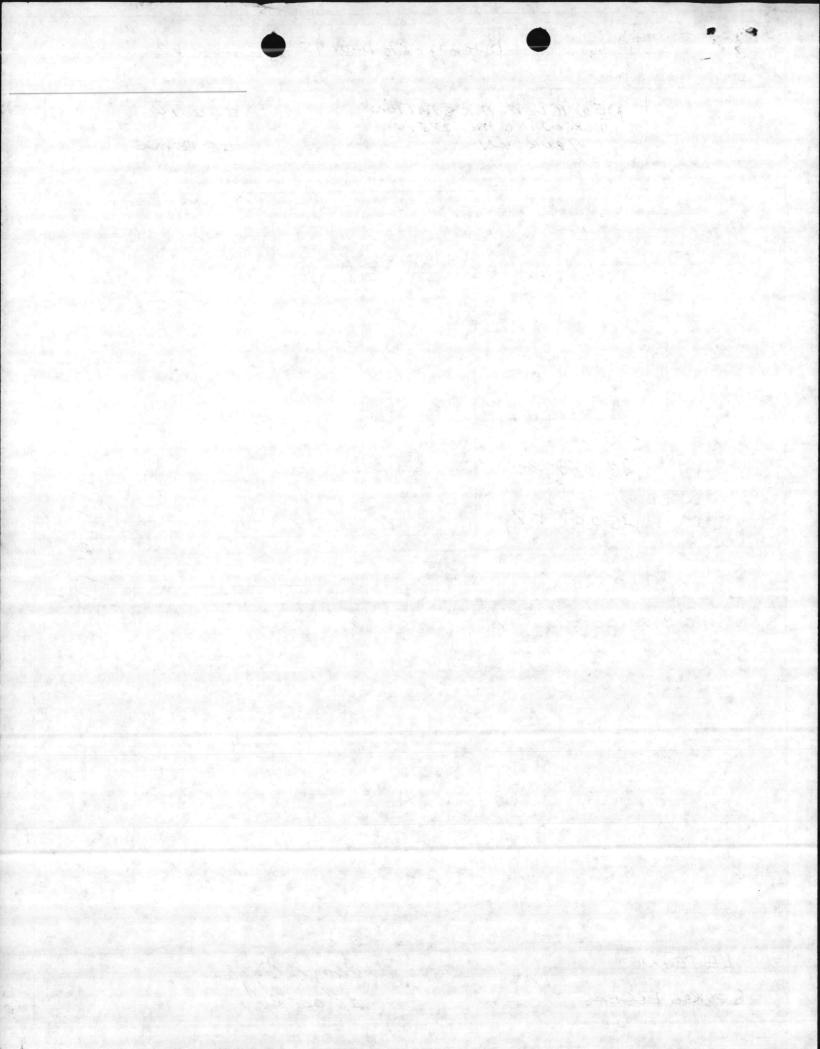
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Bureau of Waste Managemer P. O. Box 2063 Harrisburg, PA 17120 Please print or type. (Form designed for use on elite		iterry		4	Form a OMB N Expires	o. 2050-003
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In case of an emergency or spill immediately call the National Response Center (800) 424-8802 and the PA DER (717) 787-4343

INSTRUCTIONS FOR COMPLETION OF THE PA HAZARDOU WASTE MANIFEST

Please read these instructions before completing this form

GENERAL INFORMATION

This Hazardous Waste Manifest consists of eight copies. As the Manifest is completed the copies are removed from back to front.

For interstate shipments, the copies of the manifest shall be distributed as indicated at the bottom of each copy.

- For shipments within Pennsylvania, the Generator shall retain Copies 3, 4, and 8. The TSD Facility shall retain Copies 1, 2, and 6.
- If there are more than four different waste streams in a shipment, except for lab packs, complete another Manifest. If there are more than two transporters or if the waste is a lab pack, use the Uniform Hazardous Waste Manifest Continuation Sheet. Continuation Sheets may be purchased commercially. If you have any questions concerning the completion of this Manifest, call 717-787-6239.
- NOTE: For interstate shipments you may be required to supply additional information regarding the completion of lettered Items A through K. Please check with both the Generator and Destination States for specific requirements.

GENERATOR

- Item 1. Generator's US EPA ID No. Enter the twelve digit US EPA Identification Number. Manifest Document No. The generator must assign a unique five digit number.
- Item 2. Page 1 of ____ Enter the total number of pages used to complete this Manifest including the first page plus the number of Continuation Sheets, if any.
 Item 3. Generator's Name and Mailing Address Enter the complete name of the generator and the complete mailing address. The address should be the location that will manage the returned Manifest forms.
- Item A. State Manifest Document Number This Number is preprinted; do not alter it. This Number must be placed in item L of each continuation sheet.
- Item B. State Gen. ID Not required for PA Generators. See Note (above).
- Item 4. Generator's Phone Number Enter the area code and telephone number where an authorized agent of the Generator may be contacted.
- Item 5. Transporter 1 Company Name Enter the complete company name of the first transporter who will transport the waste.
- Item 6. US EPA ID Number Enter the twelve digit US EPA Identification Number of the transporter identified in Item 5.
- Item C. State Trans. ID Enter the Hazardous Waste Transporter License No. issued by PA Dept. of Environmental Resources. See Note (above).
- Item D. Transporter's Phone Enter the area code and telephone number where an authorized agent of the Transporter may be contacted.
- Item 7. Transporter 2 Company Name If applicable, see Item 5.
- Item 8. US EPA ID Number If applicable, see Item 6.
- Item E. State Trans. ID If applicable, see Item C.
- Item F. Transporter's Phone If applicable, see Item D.
- Item 9. Designated Facility Name and Site Address Enter the complete company name and complete site address of the facility designated to receive the waste listed on this Manifest. The address must be the site address, which may differ from the mailing address.
- Item 10. US EPA ID Number Enter the twelve digit US EPA Identification Number of the Designated Facility.
- Item G. State Facility's ID Not Required.
- Item H. Facility's Phone Enter the area code and phone number where an authorized agent of the Designated Facility may be contacted.
- Item 11. US DOT Description [Including Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number)] Enter the US DOT Proper Shipping Name, Hazard Class, and ID Number (UN/NA Number) for each waste as identified in 49 CFR 171 through 177.
- Item 12. Containers (No. and Type) Enter the number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.
- Item 13. Total Quantity Enter the total quantity of each waste. Do not use decimals or fractions.
- Item 14. Unit (Wt/Vol) Enter the appropriate abbreviation from Table II (below) for the unit of measure.
- Table I Types of Containers Table II - Units of Measure DM = Metal drums, barrels, kegs DT = Dump truck G = Gallons (liquids only) L=Liters (liquids only) DW = Wooden drums, barrels, kegs CY = Cylinders $\mathbf{P} = Pounds$ K = Kilograms DF = Fiberboard or plastic drums, CM = Metal boxes, cartons, cases T = Tons (2000 lbs) M = Metric tons (1000 kg) barrels, kegs (including roll-offs) Y = Cubic yards N = Cubic meters TP = Tanks portable CW = Wooden boxes, cartons, cases TT = Cargo tanks (tank trucks) CF = Fiber or plastic boxes, cartons, cases

TC = Tank cars

- BA = Burlap, cloth, paper or plastic bags
- Item I. Waste No. Enter the Hazardous Waste No. of the waste or wastes. Refer to Section 75.261 of the Department's Regulations. See Note (above). If a waste is not hazardous in PA but regulated by another State, enter that State's waste code. Also, enter in Item J, "This waste is not a hazardous waste according to PA law."
- Item J. Additional Descriptions for Materials Listed Above (include physical state and hazard code) Enter the physical state of each waste (S-solid, L-liquid, SL-sludge or G-gas) and the hazard code or codes that correspond to the Hazardous Waste No. (I-ignitable, C-corrosive, R-reactive, E-EP toxic, H-acute hazardous, and T-toxic). See Note (above).
- Item K. Handling Codes for Wastes Listed Above Not required for PA Generators. See Note (above).
- Item 15. Special Handling Instructions and Additional Information Use this space to indicate special transportation, treatment, storage, or disposal information or Bill of Lading information. For international shipments, enter the point of departure (City and State).
- Item 16. Generator's Certification Read and sign by hand the certification statement. Enter the date the waste was shipped. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g., and rail) in the space below the certification statement. TRANSPORTER
- Item 17. Transporter 1 Acknowledgement of Receipt of Materials Print or type the name of the person accepting the waste on behalf of the transporter. Sign and enter the date of receipt.
- Item 18. Transporter 2 Acknowledgement of Receipt of Materials If applicable, see Item 17.

DESIGNATED FACILITY

- Item 19. Discrepancy Indication Space The Designated Facility's authorized representative must note in this space any significant discrepancy between the waste described on the Manifest and the waste actually received.
- Item 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Print or type the name of the person accepting the waste on behalf of the owner or operator of the facility. Sign and enter the date of receipt.

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A TO SA

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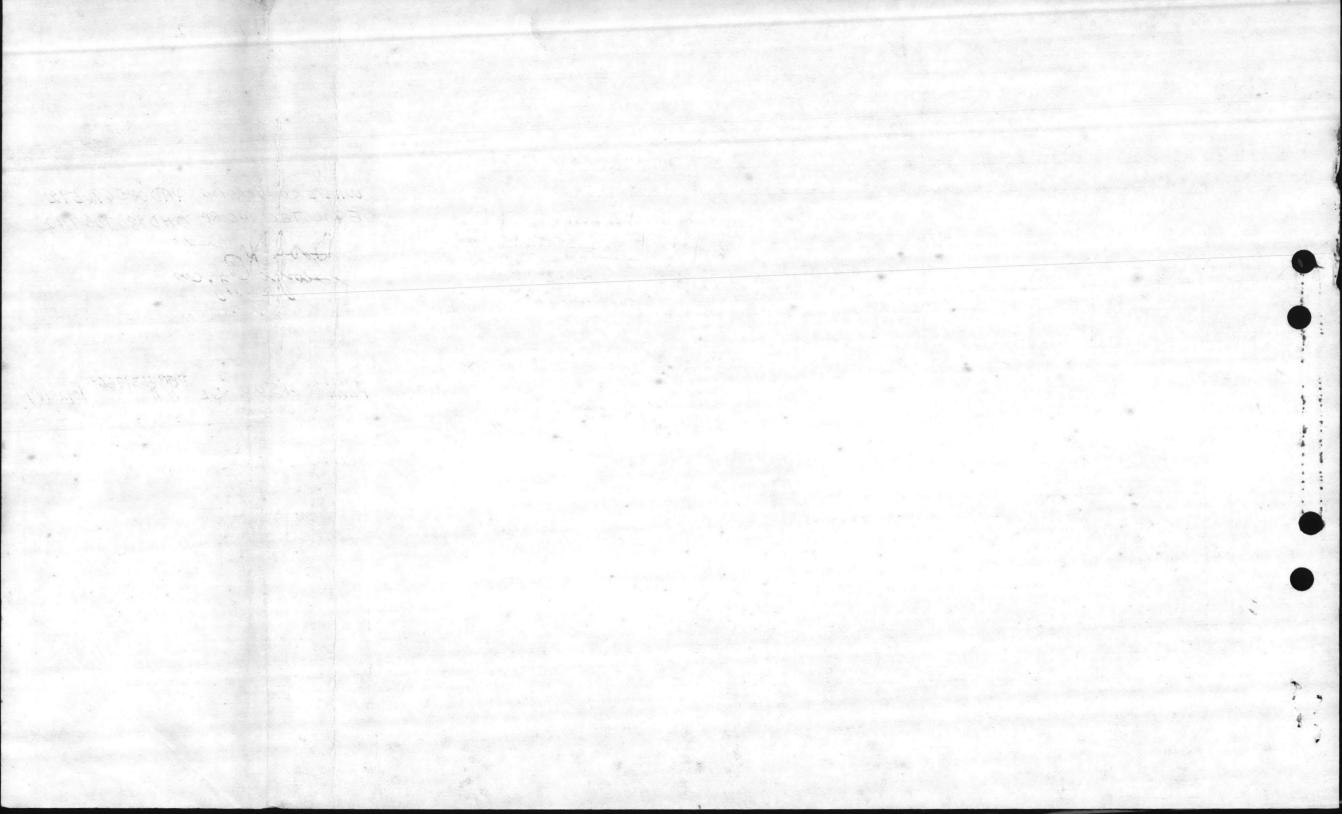
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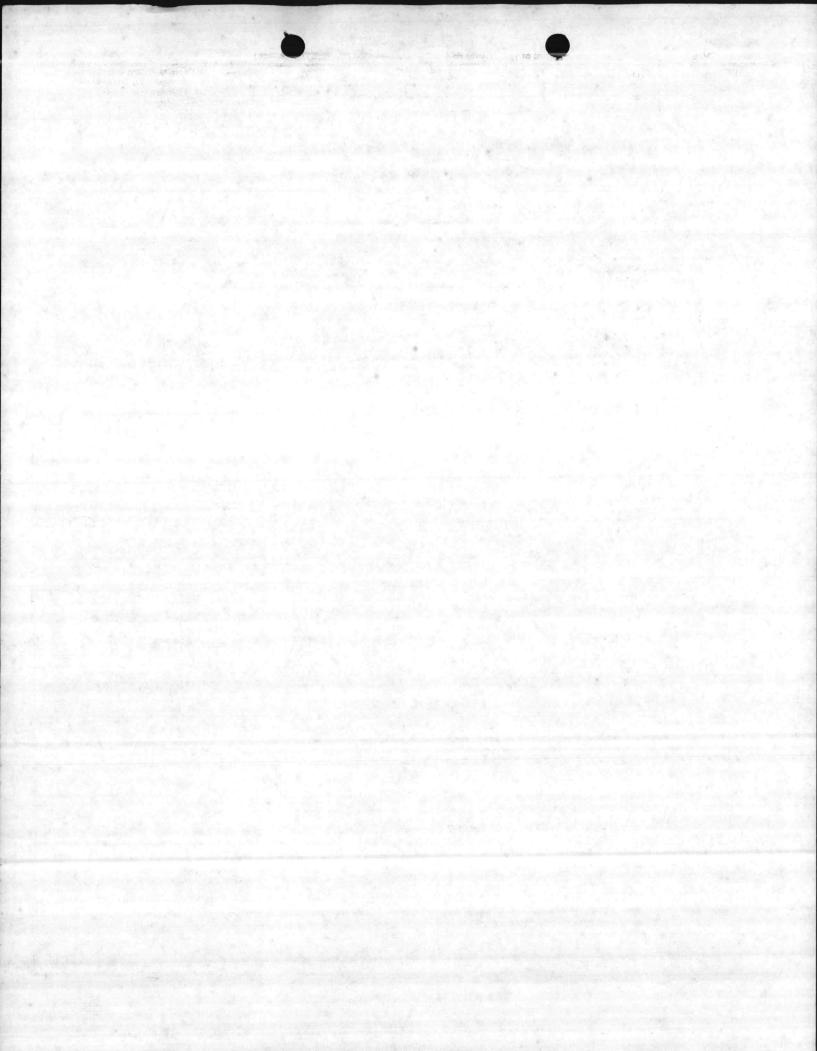
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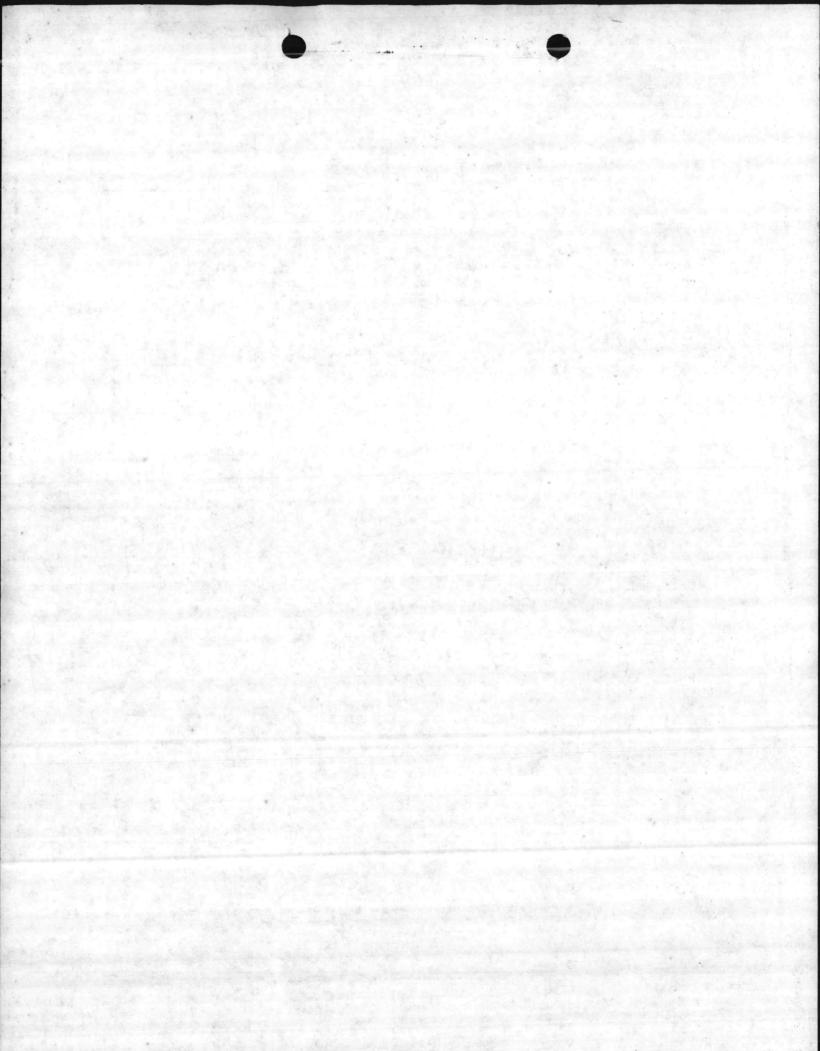
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UNIFORM HAZARDOUS WASTE MANIFEST	1 Consider's LIC EDA ID Ma	Manifest ocument No. 5.0.04	(Internetional State	age 1 Information is not require but is require	ed by Fe	deral law				
Generator's Name and Mailing Address New Kiver Air Station Camp LEJeune NC 28542			P	AB 463						
Generator's Phone (919) 451 Transporter 1 Company Name	5613 6. US EPA ID Num	ber	C. State Trans. ID							
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Designated Facility Name and Site Address		A 1022 1117	A-AH	than .	1					
Me mund the	2 KL	3.6.5.5	G. St	ate Facility's ID cility's Phone (704) Not	Required				
	ipping Name, Hazard Class, and ID Number)	12. Conta No.	alners Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.				
RQ Waste Oil n o s Combustible liquid NA1	.270 p001 F001	0.0.1	T T	5000	G	F 0 0 1 D·0 0 1				
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Additional Descriptions for Materiels Listed Haz. Code Physical State	Above (include physical state and hazard code) Haz. Code Physical State	in the second	KsHay The	sting Codes for Was	ICIS	d Above				
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5. Special Handling Instructions and Addition	nal Information DLA200-87-D-004	5 #0062			4					
classified, packed, marked, and labeled, and are If I am a large quantity generator, I certify that practicable and that I have selected the practic	I hereby declare that the contents of this consignment in all respects in proper condition for transport by highway t I have a program in place to reduce the volume and toxi able method of treatment, storage, or disposal currently av ntity generator. I have made a good faith effort to minimize	according to app city of waste gen vailable to me wh	licable in ierated to ich minim	ternational and national the degree I have deten nizes the present and fu	governm ermined to ture threa	ent regulations. b be economically t to human health				
Printed/Typed Name	Signature Altoneous	h. h	se to	k w	Mo	nth Day Year ./ J.3 7.7				
7. Transporter 1 Acknowledgement of Recel Printed/Typed Name	Signeture	Den	ine	Ju	Mo	nth Day Year				
3. Transporter 2 Acknowledgement of Re Printed/Typed Name	cceipt of Materials Signature			()	Moi	nth Day Year				
9. Discrepancy Indication Space 56516415	39	6400	LB	S						
D. Facility Owner or Operator: Certification of	of receipt of hazardous materials covered by this m	anifest except	as note	d in Item 19.						
Printed/Typed Name John Bursess	Signature	1		in-	Mo	nth Day Year				

Copy 5 - TSD Facility: Mail to Generator



SWM-51:REV, 6/87 Pleaserin	P. Harris	Waste Wastergement O. Box 2063 sburg, PA 17120 gned for use on eilte (12-	pitch)	ter.)			Form approved. OMB No. 2050-0039 Expires 9-30-88				
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3. Generator's Name and Mailing Address New River Air Station ZM: Camp LeJeune NC 28542	Marian	Base	antanga sa	A. State Manifest Document Number PAB 4632051 B. State Gen. ID SAME							
4. Generator's Phone (919) 451 561 5. Transporter 1 Company Name	6.	US EPA ID Numb	er		State Trans. ID						
Oldere Caro	LV	.A.D.O.4.0.1.5.	9.4.3.6	PA	A-AH						
7. Transporter 2 Company Name	8.	US EPA ID Numb	The Party of the P	D. Transporter's Phone (2011)							
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11. US DOT Description (Including Proper Shipping	Name, Hazard Class	, and ID Number)	12. Conta No.	Type	Total Quantity	I. Waste No.					
" RQ Waste Oil e o s Combustibel Liquid HA127(0	D001 F001	001	TT	.6.00.0	G	F001 D001				
b.											
c.											
d. J. Additional Descriptions for Materials Listed Abov				K. Hang	tling Codes for Wa	stes Liste	ed Above				
Haz. Code Physical State a	e.	Physical State	and the rest	278	Lighta	yeia	54+				
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 15. Special Handling Instructions and Additional Intal Action A	eby declare that the co respects in proper condi e a program in place to nethod of treatment, sto	ntents of this consignment ar tion for transport by highway a reduce the volume and toxici rage, or disposal currently ava	ccording to appl ity of waste gen ilable to me whi	icable inte erated to ch minimi	ernational and national the degree I have de zes the present and f	al governm termined it uture threa	ent regulations. o be economically at to human health				
Printed/Typed Name		Signature Faces	A. 14	er to	£	Mo	nth Day Year				
17. Transporter 1 Acknowledgement of Receipt of Printed/Typed Name	Materials	Signature Jud	Endo			Mo	nth Day Yea √				
18. Transporter 2 Acknowledgement of Receipt Printed/Typed Name	of Materials	Signature				Mo	nth Day Yea · · · ·				
19. Discrepancy Indication Space 5886645			ICBA	10		27					
20800412	SG GGIS 415806BS or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.										
20. Facility Owner or Operator: Certification of rec	elpt of hazardous ma	terials covered by this ma	nifest except	as noted	in Item 19.						

Copy 5 - TSD Facility: Mail to Generator



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